L17000034630

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400344502844

05/1**8**/20--01002--013 ++60.00

RECEIVED

MAY 1 8 2020

11:9 HA SI 185705



COVER LETTER

Division of Corpor		
CHEMWISE I	LLC	
SUBJECT:		_
	Name of Limited Liability Company	
•		
The enclosed Articles of Ame	endment and fee(s) are submitted for filing.	
Please return all corresponder	nce concerning this matter to the following:	•
	ALEXANDRIA PARKER	
-	Name of Person	_
	CHEMWISE LLC	
-	Firm/Company	
	19906 BEVERLY PARK RD	
•	Address	
	ESTERO, FL, 33928	
	City/State and Zip Code ADMIN@SIMPLEPLANTFOOD.COM	_
-	E-mail address: (to be used for future annual report notification)	-
For further information conce	erning this matter, please call:	
ALEXANDRIA PARKER	239 345-0043	
Name of Per	rson at (ber
Enclosed is a check for the fo	ollowing amount:	
□ \$25.00 Filing Fee	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate of Status Certificate Copy is enclosed)	Filing Fee, icate of Status & ed Copy nal copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2070 " IS PM 6: 44

CHEMWISE LLC			
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears o Liability Company)	n our records.)	· .
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	0/2010	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here	:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the design	gnation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u></u>	
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		<u> </u>	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our reco	ords, <u>enter the na</u>	ne of the new register
Name of New Registered Agent:			
New Registered Office Address:	F - D - 1		
	Enter Florida	street address	•
·	City	, Florida _	Zip Code
New Designational Asserts Cignature if shanging Designatured Asserts	•		Esp Cont
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ree to act in this cap performance of m provided for in Chi	y duties, and I am apter 605, F.S. Oi	familiar with and , if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ALEXANDRIA PARKER	19906 BEVERLY PARK RD	
	•	ESTER, FL, 33928	
			□ Remove
			■ Change
AMBR	LAINA POSEY	7440 LAKE BLVD	
			□Add
		SPANISH FORT, AL, 36527	
	,		□ Remove
			E.a.
ANTON	KYLE PARKER	10000 DEVERTY DARK DE	■ Change
AMBR	NTLE PARKER	19906 BEVERLY PARK RD	
•		ESTERO, FL, 33928	Undu
		13111(0,12,0000	Remove
٠			
			□ Change
			□Add
•		<u> </u>	□Remove
			-
			🗆 Change
	·		
		·	
			
			Remove
			☐ Change
			Li Change
			□Add
,			
	•		□Remove
	•		□ Change

		 		
			- ·	<u> </u>
<u>. </u>	•			
			· · · · · ·	
·				
		-		
		.		
				
				
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
•				
				
tive date if other than ti	he date of filing:		(antin-	.n
ffective date is listed, the date n	he date of filing: must be specific and cannot be prio	r to date of filing or more th	an 90 days after fili	ng.) Pursuant to 60:
in the date inserted in this	block does not meet the appli Department of State's records	cable statutory filing req	uirements, this da	te will not be list
	•			
rd specifies a delayed effect	tive date, but not an effective I	time, at 12:01 a.m. on the	e earlier of: (b)	The 90th day afte
		,	(-)	
filed.				
îled.	2020			
ñled. MAY 12	2020	<u> </u>		
iled. MAY 12	2020	 ,		
iled. MAY 12	2020 Signature of a member of auth	porized representative of a r	nember .	

Filing Fee: \$25.00