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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: TRUFFLE C	ORNER LLC Name of Limited Liability	Company	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, ¹³ .
The enclosed Articles of Amendment and	ce(s) are submitted for f	iling.		
Please return all correspondence concerning	g this matter to the follow	wing:		
A	yelet Edel	stein		
	TAL ORGAI	VCompany	···	
35	68 5W 40	2 Court	and the second s	17 HIR 27 PH 2: 08
<u></u> F +.	Layderdal City/State DRGANIC LLe nail address: (to be used for	e, FL 3 and Zip Code	3312	R 27 P
Total	DREANIC LL	r future annual report no	d. com	H 2: 08
For further information concerning this ma	tter, please call:			
Ayelet Edelstein Name of Person	<u>at (</u>	786 YUA Area Code Daytin	- 9898 me Telephone Number	
Englosed is a check for the following amo	int:			
\$25.00 Filing Fee □ \$30.00 Filing Certificate	of Status Cert	00 Filing Fee & ified Copy tional copy is enclosed)	Certified	e of Status &

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRUFFLE CORN		
(<u>Name of the Limited Liabi</u> (A Flori	lity Company as it now appears on our red da Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Florida document number <u>L17 0000 5 7777</u>		17 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here:	
TOTAL ORGANIC LLC		
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	755
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		#R 27 PH 2: 1
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		ords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	ldress
		, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

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:

	Annager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Ayelet Edelstein	3568 SW 49 Court	Add
		Ft. Lauderdale, FC33312	Remove
			Change
CEO Ayelet Edelstein	Ayelet Edelstein	3568 SW 49 Court	\ Add
		H. Lauderdale, FC 33312	□ Remove
			Change
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	All e-mails	must be	send to:		
	Total Organi	cuc @	gwail.co	M	
					THR 27
					27 PH 2:
(If an effective Note: If the	ate, if other than the date of date is listed, the date must be spec- date inserted in this block doe effective date on the Departmo	eific and cannot be prior es not meet the applic	cable statutory filing re	(optional) than 90 days after filing.) Prequirements, this date will	rsuant to 605.0207 (3 I not be listed as the
	specifies a delayed effect of the contract of the contract of the record is		ot an effective tim	e, at 12:01 a.m. on	the earlier of:
Dated3	-20-2017		<u> </u>		
	[·//»	11/C	norized representative of		

Page 3 of 3

Filing Fee: \$25.00