# 117000150467

(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



400321251024

12/17/18--01023--022 \*+25.00



N. CAUSSEAUX JAN 4 2019

### **COVER-LETTER**

Division of Corporations
SUBJECT: Vibrance Hooping, LLC Name of Elmited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kati Griffith  Name of Person
Vibrance Hooping, LLC Firm/Company
267 Stillwater Rd Address
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
To further information concerning this matter, prease can.
Name of Person at ()
Enclosed is a check for the following amount:
S25.00 Filing Fee  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

#### MAILING ADDRESS:

TO: Registration Section

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

Vibrance Hos	ping, LLC		
(Name of the Limited ) (A	iability Company as it now appear. Florida Limited Liability Company)	<u>s on our records.</u> )	المراجع المراجع
		0 1.0 118	and assigned
The Articles of Organization for this Limited Liabi		71111	and assigned
Florida document number <u>L 1700015040</u>	27		Ç.
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th			
The new name must be distinguishable and contain the word	unt, LLC		
The new name must be distinguishable and contain the word	s "Limited Liability Company," the de	esignation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:		
(Principal office address MUST BE A STREET A	ADDRESS)	<u> </u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
	<del></del>		
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, enter	the name of the new
registered agent and/or the new registered once	e address here.		
Name of New Registered Agent:			
Name of New Registered Agent.			
New Registered Office Address:	Enter Flor	rida street address	
	33mc/ 1 107		
	City	, Florida _	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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			□ Add
			☐ Remove
			Change

	 Change
 	 □ Add
	 ☐ Remove
	 Change
	 Change
	 ☐ Remove
 	 D Add
	□ Remove
	 Change
	🖸 Add
	 □ Remove
	Change
	 Change

	· · ·
	2 %
	<del></del>
<u></u>	
	<del></del>
ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing to listed. If the date inserted in this block does not meet the applicable statutory focument's effective date on the Department of State's records.	(optional) or more than 90 days after tiling.) Pursuant to 605.0207 ( iling requirements, this date will not be listed as the
e record specifies a delayed effective date, but not an effectiv The 90th day after the record is filed.	e time, at 12:01 a.m. on the earlier of:
pated December 12th. 2018.	
Signature of a member or authorized representa	utive of a member

Page 3 of 3

Filing Fee: \$25.00