

L17 000250120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

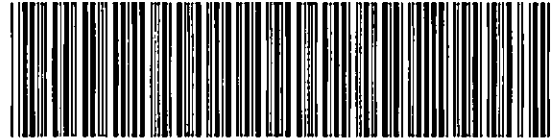
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL
2020 SEP 21 AM 11:40

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OCT 28 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Chobee Grocery and Beauty Supplies

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Emmaline Harris

Name of Person

Chobee Grocery and Beauty Supplies

Firm/Company

PO Box 3111

Address

Okeechobee, FL 34973

City/State and Zip Code

chobee-groceryandbeauty@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emmaline Harris

863 634-9194
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional 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

FILED
2020 SEP 21 AM 11:40
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Chobee Grocery and Beauty Supplies

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/06/2017 and assigned
Florida document number L17000250120.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 3111

Okeechobee, FL 34973

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Emmaline Harris

New Registered Office Address:

807 NE 13th Ave

Enter Florida street address

Okeechobee

City

Florida

34972

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
M	Keiera Roberts	725 NE 14th Ave	<input type="checkbox"/> Add
		Okeechobee, FL 34972	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2025 SEP 2 AM 10:40
TALLAHASSEE
FLORIDA
STATE
ARCHIVE

2020 SEP 21 AM 11:40
SECURITY
TALLAHASSEE, FL

2020 SEP 21 AM 11:40
SECTION 11.3
TALLAHASSEE

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Sept 2, 2020.

Emmaline Harris
Signature of a member or authorized representative of a member

Emmeline Harris
Typed or printed name of signee