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COVER LETTER

TO:	Registration S Division of Co			
SHRI	CELIS NO	RTHWOOD LLC		
		Name of Lin	nited Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	e return all corresp	ondence concerning this matter	to the following:	
		ALEJANDRO CELIS		
			Name of Person	
			Firm/Company	
		2814 S DIXIE HIGHWAY	Y SUITE D	
			Name of Limited Liability Company fee(s) are submitted for filing. Ing this matter to the following: O CELIS Name of Person Firm/Company IE HIGHWAY SUITE D Address M BEACH, Fl. 33405 City/State and Zip Code IS-PRODUCE.COM -mail address: (to be used for future annual report notification) atter, please call: at (
		WEST PALM BEACH, F	1. 33405	
		ALEX@CELIS-PRODUCT	•	
		E-mail address: (to be used for future annual report notifi-	cation)
For fu	other information of	concerning this matter, please c	all:	
ALEJ	IANDRO CELIS		561 543-6007	
	Name o	of Person	Area Code Daytime	Telephone Number
Enclo	sed is a check for t	he following amount:		
≡ \$2	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	☐ \$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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appear Liability Company)	s on our records.)		
The Articles of Organization for this Limited I Florida document number $\frac{L18000003502}{L18000003502}$	Liability Company	y were filed on $\frac{01}{2}$	04.2018	_ and assigned	d
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited lial	bility company he	<u>ere</u> :		
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the d	esignation "LLC" or the abbro	eviation "L.L.C."	
Enter new principal offices address, if appli	cable:				
(Principal office address MUST BE A STRE	ET ADDRESS)				<u>요</u> 당
Enter new mailing address, if applicable:		2814 S DIXIE I	IIGHWAY SUITE D	N	1737.0
(Mailing address MAY BE A POST OFFICE	EBOX)	WEST PALM E	BEACH, FL 33405	 	
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:		<u>re</u> :	our records, <u>enter th</u>	Position in the second	he n
	2814 \$ DIVIE	HIGHWAY SUITI	: D		
New Registered Office Address:			ida street address		
	WEST PALM	ВЕАСН	, Florida <u>3340</u> ;	5	
		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 Registerer 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
MGR	ALEJANDRO CELIS	2814 S DIXIE HWY D	
		WEST PALM BEACH, FL 33405	Remove
			Change
AMBR	CELIS PRODUCE LLC	2814 S DIXIE HIGHWAY	■ Add
		SUITE D	□ Remove
		WEST PALM BEACH, FL 33405	☐ Change
			Remove
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if an effe <u>Note:</u>	ve date, if other than the date of filing:	unt to 605 ot be liste	.0207 (ed as t
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	ie earlie	er of:
Dated _.	5/25.2018		
	Signature of a member authorized representative of a member		

Page 3 of 3

Filing Fee: \$25.00