## L18000005887

(Re	equestor's Name)	,
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Dx	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





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J. HARRIE

## COVER LETTER .

TO		gistration Sec ision of Corp			
CI	IR IECT.	Vicki's Merc	antile, LLC		
30	SUBJECT: Name of Limited Liability Company				
Th	e enclosed	Articles of A	mendment and fee(s) are subn	nitted for filing.	
Ple	ease return	all correspon	dence concerning this matter t	to the following:	
			Bert Moore		
				Name of Person	
Firm/Company					
			2187 Chase Drive		
Address				<del></del>	
			Niceville, FL 32578		
	City/State and Zip Code				
			vmoore845@gmail.com	o be used for future annual report notificat	<del></del>
				·	non)
Fo	r further ir	nformation co	ncerning this matter, please ca	11:	
В	ert Moore			850 689-1603 at ()	
		Name of	Person	Area Code Daytime To	elephone Number
En	closed is a	check for the	following amount:		
	\$25.00 F	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/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vicki's Mercantile, LLC		
(Name of the Limited Liability (A Florida Li	Company as it now appears on our mited Liability Company)	records.)
The Articles of Organization for this Limited Liability Com	npany were filed on 1/8/2018	and assigned
Florida document number L18000005887		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
Vaping Warrior, LLC		
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 ADDRES	<u>(223)</u>	
		THE CONTRACTOR OF THE PARTY OF
Enter new mailing address, if applicable:		900
(Mailing address MAY BE A POST OFFICE BOX)		
	<del></del>	e <b>cp</b>
B. If amending the registered agent and/or register registered agent and/or the new registered office address		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	OMITESS
		_, 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:

MGR = Manager

$\mathbf{AMBR} = A$	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Change
			Remove
			Change
			Remove
			☐ Change
			Add
			Remove
			Change
			Remove
			Change
			Add Two
			Remove 7
			☐ Change

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an effective date is ote: If the date is occument's effection record species	inserted in this block does ive date on the Departmer	fic and cannot be prior to date on the not meet the applicable state of State's records.	(opt filling or more than 90 days afte utory filling requirements, the fective time, at 12:01	er filing.) Pursuant to 605.020 iis date will not be listed as
nted		. ZOD .		
	june 1	Noue		2018 
	Signature	e of a member or authorized rep	presentative of a member	
Vicki I	Moore			
		Typed or printed name	of signee	
				# 변경 <b>연</b> · ·
		Page 3 of 3		<u> 연</u>

Filing Fee: \$25.00