118000025748

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT	MAIL	
(Business Entity Name)	_	
(Document Number)		
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02/26/18--01012--020 **30.00

J. LEGGETT FEB 2 6 2018

COVER LETTER

TO: Registration Section Division of, Corporations
SURJECT: Halo Potato LLC 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:
Name of Person
Name of Person
Halo Potato LLC Firm/Company
Firm/Company
4600 SW 13th Street Apt. 1415 Address
Gainequille FL. 32608 City/State and Zip Code
City/State and Zip Code
halopotato Co Ognail Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (352) 693 - 026 Z Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee Certificate of Status □ \$60.00 Filing Fee, Certificate of Status 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

(Name of the Limited Liability Compan (A Florida Limited Li	iy as it now appears on our records.) iability Company)
	1 1
he Articles of Organization for this Limited Liability Company v	were filed on and assigned
orida document number <u>L 180000 257 48</u> .	
his amendment is submitted to amend the following:	>
. If amending name, enter the new name of the limited liabil	lity company here:
he new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	. 7 8
	T. T.
	2. F
inter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
8. If amending the registered agent and/or registered off egistered agent and/or the new registered office address here Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	City Zip Code
ew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agreer rovisions of all statutes relative to the proper and complete peccept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
	ging Registered Agent, Signature of New Registered Agent
II Chan	Rink Bedisteren Whenry albustrate of them Bedisteren Whenr

nending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added emicyed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Lauren N Perry	124 NW 27th Terrace	
		124 NW 27th Terrace Cainesville, FL. 32607	Remove
			Change
			Remove
			Change
			Add
			☐ Remove
			☐ Change
			□ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			□ Remove
			_ □ Change

If amending any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)
	
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Effective date, if other than the date of filing:	2/1/2018 (optional)
	capplicable statutory filing requirements, this date will not be listed as
and the incident date on the inepartment of State 3 to	ccords.
The Oath day after the record is filed	out not an effective time, at 12:01 a.m. on the earlier of
Dated 2/20 (February 20th) 20	18
Signature of a member of	or authorized representative of a member
1 Secus	tueman

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00