# L1800003034/

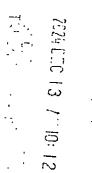
(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	- 1
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### **COVER LETTER**

The Crun				
CITIES TELEVISION	chy Couple, LLC			
30 <b>1</b> 3000 1.	Name of Lim	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	emitted for filing.		
Please return all corresp	condence concerning this matter	to the following:		
	Jarrod Roussel			
		Name of Person	· • • • • • • • • • • • • • • • • • • •	
	The Crunchy Couple, LLC	;	ode  aual report notification)  432-37(N)  Daytime Telephone Number  fee &  \$60.00 Filing Fee.	
		Firm/Company	<del></del>	
	109 Sun Bear Cir			
		Address		
	Freeport, FL 32439			
		City/State and Zip Code		
	business@poweronplants.co			
		to be used for future annual report no	tification)	
For further information	concerning this matter, please ca	all:		
Jarrod Roussel				
Name	of Person	Area Code Dayti	me Telephone Number	
Enclosed is a check for	the following amount:			
<b>■</b> \$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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa	mt as if hat appears on our page	rede \
(A Florida Limited	Liability Company)	<u>11 (3.c.)</u>
he Articles of Organization for this Limited Liability Company lorida document number L18000030241	were filed on	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
Power On Plants, LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "Ll	LC" or the abbreviation "L.L.C."
inter new principal offices address, if applicable:	109 Sun Bear Cir	
Principal office address MUST BE A STREET ADDRESS)	Freeport, FL 32439	
		224 [
nter new mailing address, if applicable:	109 Sun Bear Cir	[]
Mailing address MAY BE A POST OFFICE BOX)	Freeport, FL 32439	<u> </u>
		1
		Ü
Name of New Registered Agent:  New Registered Office Address:	Enter Florida street addi	
<u> </u>		Florida
	City	Zip Code

### New Registered Agent's Signature, if changing Registered Agent:

The Country Country LLC

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>	Address	Type of Action
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