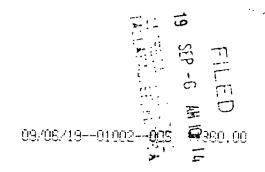
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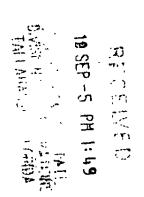
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COVER LETTER

VIBRANT	LIFE GROUP LLC				
SUBJECT: Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	BERTOSSA, RICHARD				
	-	Name of Person			
	VIBRANT LIFE GROUP	LLC			
	FirmCompany				
	2880W OAKLAND PARI	CBLVD, SUITE 118		=	
	(AARI ANDAARE EL 2)	Address	<u> </u>	<u>1</u>	
	OAKLAND PARK, FL 33				
	INFO@US.OFFICE201.NE	City/State and Zip Code		ALLANDO DELÍBORA	
	E-mail address: (to be used for future annual report notifi	cation)	'- -	
For further information c	oncerning this matter, please c	all:	,	-	
RICHARD BERTOSSA		507 4910380 ar()			
Name o	d Person	at () Area Code Daytime	Telephone Number	_	
Enclosed is a check for the	he 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 in Certificate of Certified Copy (additional copy)	Status & y	
	ING ADDRESS:	STREET/COURIE Registration Section			
Registration Section Division of Corporations		Division of Comorations			

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIBR	ANT	LIFE	GROUP	11.0

(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 $\frac{02/13/2018}{1}$ and assigned Florida document number <u>L18000039948</u> 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.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) 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: CORPORATIONS SERVICES & REGISTERED AGENTS TNC Name of New Registered Agent: 2398 COMMERCIAL WAY, SUITE 224 New Registered Office Address: Enter Florida street address , Florida ³⁴⁶⁰⁶
Zip Code SPRING HILL

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

Page 1 of 3

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 = M $AMBR = A$	danager Authorized Member		
Title	<u>Name</u>	Address	Type of Action
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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to a Note; If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	(optional) date of filing or more than 90 days after filing.) Pursuant to 605.0207 (le statutory filing requirements, this date will not be listed as the
the record specifies a delayed effective date, but not a The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier of:
Dated SEP 03 . 2019	
// vun/	
M viva Sename of a member or authorize	red representative of a member

Page 3 of 3

Filing Fee: \$25.00