

L180000061396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

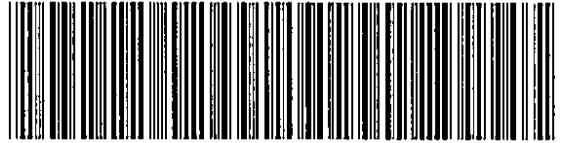
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400343842284

04/27/20--01034--006 **25.30

2020 APR 27 AM 7:14
FILED
CLERK OF COURT

Fax



The UPS Store

South Lake Plaza

614 E Hwy 50

PH: 352-394-071

Clermont, FL 34711

Fax: 352-394-629

store3374@theupsstore.com

- * Private Mail Box Service
- * Fax Send or Receive
- * Copies, Copies, Copies
- * Color Laser Copies
- * Large Format Copies
- * Pack & Shipping Services
- * Package Receiving
- * Mail Call In/Check
- * Complete Postal Services
- * Office Supplies
- * Same Day Business Cards
- * Rubber Stamps
- * Finishing Services
- * Passport Photos
- * Notary Services
- * Greeting Cards
- * Business House Accounts
- * Direct Mail/EDDM
- * Posters/Banners
- * Packaging Supplies
- * Computer Rental
- * Freight Services
- * Small Business Solutions
- * Shredding
- * DHL



URGENT



CONFIDENTIAL

Date _____ Time _____

To: Division of corporation
The centre of Tallahassee

Fax: _____

From: Akeema Branch

Phone: 352-225-8602

of Pages (including this cover sheet) _____

Message: Form and \$25 money order

for changing my LLC Business
name to ("Branch Organics LLC")

If Any question please Call.

This facsimile may contain PRIVILEGED and/or CONFIDENTIAL INFORMATION intended only for the use of the addressee. If you are not the addressee, or the person responsible for delivering this to the person addressed, you may not copy or deliver this to anyone else. If you have received this facsimile by error or have not received the correct number of pages, please notify us immediately at the number above. Thank you.

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Judah Arts Experience LLC

(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 March 8, 2018 and assigned
Florida document number L18000061396.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Branch Organics 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 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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, **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


AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

2021 APR 27 AM 7:11
C:\Users\j... \Documents

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated April 24, 2020


Signature of a member or authorized representative

Typed or printed name of signee