2/26/2019 Division of Corporations

L19000073761

Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

ZATIVA LIFE HEALTH & WELLNESS I LLC

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S. PRATHER

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ZATIVA LIFE HEALTH & WELLNESS I 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 03/21/2018 and assigned Florida document number L18000073761.

This amendment is submitted to amend the following:

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

ZATIVA LIFE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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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)

6104 S DIXIE HWY
SOUTH MIAMI, FL 33143

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: ARTURO RODRIGUEZ

New Registered Office Address: 6104 S DIXIE HWY
Enter Florida street address

SOUTH MIAMI, Florida 33143
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

Title	Name	Address	Type of Action
MGR	SERGIO MENA	1000 PONCE DE LEON BLVD.	☐ Add
		CORAL GABLES, FL 33134	■ Remove
			☐ Change
MGR	ARTURO RODRIGUEZ	6104 S DIXIE HWY	■ Add
		SOUTH MIAMI, FL 33143	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**
(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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated FEBRUARY 25, 2019

Signature of a member or authorized representative of a member

ARTURO RODRIGUEZ ARTURO RODRIGUEZ
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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