Division of Corporations

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H18000135437/3)))



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Division of Corporations

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From:

Account Name DAVID TORCHIN,

Account Number : 119990000007

: (954)373-6300

Phone Fax Number

: (954)3763-6300 : (954)323-6301

**Enter the email address for this business entity to be used for future

APR 30 PM 3: 3

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE CLEVER CHEMIST, LLC

annual report mailings. Enter only one email address please.**

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Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

4/30/2018

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Clever Chemist,		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on ou bility Compuny)	r records.)
The Articles of Organization for this Limited Liability Company was Florida document number L18000102948	ere filed on 04/24/201	8 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ty combany here:	
The new name must be distinguishable and contain the words "Limited Liability	Comp. w." the decionati	on "I I C" or the abbreviation "I I C"
•	company, the designant	on the or the appreviation blace.
Enter new principal offices address, if applicable:		1900
(Principal office address MUST BE A STREET ADDRESS)	- 	
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· ·	74. 74	တွင်း 🕶 🛪
Enter new mailing address, if applicable:	 	
(Mailing address MAY BE A POST OFFICE BOX)		The same of the sa
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		9
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our i	records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	el address
0-450	to num b	, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	317	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of my du ovided for in Chapter	ties, and I am familiar with and r 605, F.S. Or, if this document is
If Changi	ng Registered Agent, Sig	nature of New Registered Agent

MGR = Manager

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

MIGR = Manager AMBR = Authorized Member		1		
<u>Title</u>	<u>Name</u>	Address	Type of Action	
MGR	Nicolas Adalberto	15032 SW 3rd Street	□ Add	
		Davie, Fl 33331	■ Remove	
		· · · · · · · · · · · · · · · · · · ·	Change	
MGR Nicolas Lares	Nicolas Lares	15032 SW 3rd Street	■ Add	
		Davie, FI 33331	☐ Remove	
			☐ Change	
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ective date, if other than the date of filing: effective date is listed, the date must be specific and can eg: If the date inserted in this block does not meet ument's effective date on the Department of State	not be prior to date of filing or more than 90 days the applicable statutory filing requirements	optional) safer fling.) Pursuant to 605,021 s, this date will not be listed a
record specifies a delayed effective date he 90th day after the record is filed.	but not an effective time; at 12:	01 a.m. on the earlier (
04130	2018 A LINE	7

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