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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Cale You Herbanics LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alexandra Better
Mareanda Boll. Firm/Company
35117 Meadaw Breach D6
Zephyshlls 12/33541 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alexandra Deltran at (213) 836-3273 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S25.00 Filin

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Compan	iv as it now appears on our records.)
(A Florida Limited Li	lability Company)
The Articles of Organization for this Limited Liability Company v	were filed on $\frac{5/10/2018}{}$ and assigned
Florida document number <u>L18000 11741 R</u> .	,
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
	ACC STREET
The new name must be distinguishable and contain the words "Limited Liability	ty Company. the designation "LLC" or the above nation LLC.
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	Mark The Control of t
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
	1 0 U-
Name of New Registered Agent: Alexan	la Betran
New Registered Office Address: 35117 19	Enter Florida street address
7-20/W1	Hills . Florida 3354
2 Ch. 141	Cuy 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.

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 **Type of Action** <u>Title</u> Name **Address** Alexandra Beltan ☐ Remove ☐ Change ☐ Remove □ Add ☐ Remove 2019 □ Change _□‰ <u>.</u>□ K¢move ☐ Change □ Add □ Remove _□ Change □ Add ☐ Remove ☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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AH SSE
E. Effective date, if other than the date of filing: 5-10-2018 (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 $0/-07-20/8$.
Callerson Deffor, Signature of a member or authorized representative of a member
Signature of a member or authorized representative of a member Mexandra Beltran Typed or printed name of signee

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Filing Fee: \$25.00