## L18000 157805

(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



700346373417

06/17/20--01006 -019 \*\*25.00

2020 CTV 17 AN 8: 20

Amend

JUL 3 () 2020 I ALBRITTON

## **COVER LETTER**

TO: Registration So Division of Cor		1. 4	
SUBJECT: Veg'n O	ut, LLC		
50 <b>5</b> ,7,61.	Name of Lim	ited 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:	
	Ashley Swanson		
		Name of Person	
	Veg'n Out, LLC		
		Firm/Company	
	4306 Biscayne Cove	e Court	
		Address	
	Kissimmee, FL 3474	14	
		City/State and Zip Code	
	ashley@vegnoutnow E-mail address: (	COM to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Ashley Swanson		at ( 407 ) 529-5274	<u> </u>
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	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 Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	
Registration Division of 0		Registration Se Division of Cor	
P.O. Box 633	•	The Centre of T	•

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Veg'n Out, LLC		
(Name of the Limi	ted Liability Company as it now appears of (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited L	iability Company were filed on 06/2	27/2018 and assigned
Florida document number <u>L18000157805</u>	<del>,</del> .	
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name o	f the limited liability company here	\$
The new name must be distinguishable and contain the v	words "Limited Liability Company," the design	gnation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applic	eable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	22
		220
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	
		æ <u> </u>
		20
B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office address on our reco ss here:	ords, enter the name of the new registered
Name of New Registered Agent:	Ashley Swanson	
New Registered Office Address:	4306 Biscayne Cove Court	
	Enter Florida	street address
	Kissimmee	Florida 34744
	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>	Address	Type of Action
			□ Remove
			Change
		<del></del>	
			□ Change
			□Add
		□Remove	
			□Change
			□Add
			Remove
			□ Change
			□ Add
		□Remove	
			□Change
			□Add
			Remove
			□ Change

•	
	<u> </u>
-	
n efi <u>te:</u>	tive date, if other than the date of filing:
s tī	rd 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 led.
	June 15 2020.
ed	
ted	Ashler Suram
ted	June 15 . 2020 .  Ashly Suram  Signature of a member or authorized representative of a member

Filing Fee: \$25.00