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# Articles of Amendment Cover Letter

\*Adding authorized persons to Eden Movement LLC

Julie Peck

Daytime phone #: 330.801.0775

Return Address: 204 37th Ave N #444 St. Petersburg, FL

33704

FOUNDER EDEN MOVEMENT info@eden-movement.com

# **EDEN**

## **COVER LETTER**

TO: Registration Sec Division of Corp			
CHRIDATE 2	19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ited Liability Company	
300,FC1	Name of Lim	ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
		Name of Person	
	<del></del>	Name of Person	
	201	Firm/Company	
		世ナルデ )、 詳立	
	170 9月	City/State and Zip Code  City/State and Zip Code  to be used for future annual report notifi	<u> </u>
	• E-mail address: (	to be used for future annual report notifi	ication)
	neerning this matter, please ca		
	4	at (20) Collection Daytime	~,-,5
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the			
S25.00 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 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 Comp (A Florida Limited	any as it now appe Liability Company	ears on our records.)		
The Articles of Organization for this Limited Liability Company Florida document number			and assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lial	bility company	<u>here</u> :		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the	e designation "LLC" or the	e abbreviation "L.L.	.C."
Enter new principal offices address, if applicable:	<del></del>		<b></b>	_ <del>Z</del> ~
(Principal office address MUST BE A STREET ADDRESS)		· · ·	A A	<u> </u>
				<u> </u>
Enter new mailing address, if applicable:			7 AM	10 AND 1. 15 AND
(Mailing address MAY BE A POST OFFICE BOX)			9: 01	RATIO
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		on our records, <u>ent</u>	er the name o	f the no
Name of New Registered Agent:				
New Registered Office Address:	Enter F	lorida street address	<del> </del>	
		Florida	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
	1. 医尼桃	204 3 15 A. S.	O ∧dd
		#1444	Remove
		7. 17/20 DIKI, FT 3375	Change
			☐ Remove
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fan effectiv <mark>Note:</mark> If t	date, if other than the date of filing:	.) Pursuant to 605.0.	
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. th day after the record is filed.	on the earlier	r of
1110 30			
	5 7 · · · · · · · · · · · · · · · · · ·		
	Signature of a member or authorized representative of a member		

Page 3 of 3

Filing Fee: \$25.00