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SECRETARY OF SINIS
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COVER LETTER

TO:	Registration Se Division of Cor				
CH III I	Be Positive	L.L.C.			
SUBJECT: Name of Limited Liability Company					
The e	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	e return all correspo	ondence concerning this matter	to the following:		
		Brian Porter			
		Be Positive L.L.C.	Name of Person		
		5623 Osprey Park Place	Firm/Company		
		Lithia, FL 33547	Address		
		porterbrian41@yahoo.com	City/State and Zip Code		
		E-mail address: (to be used for future annual report not	ification)	
For fu	irther information c	oncerning this matter, please ca	all:		
Shanc	: Stults		850 377-6792	·-·	
	Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclo	sed is a check for th	ne following amount:			
≘ \$2	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 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

Be Positive L.L.C. (Name of the Limited Liability C	Company as it now appears on our records.)
(A Florida Lii	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com	npany were filed on 10-24-20/8 and assigned
Florida document number <u>L18000250185</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	<u>ss</u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	red office address on our records, <u>enter the name of the new</u> is here:
Name of New Registered Agent:	
	·
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered A	gent:
provisions of all statutes relative to the proper and com	d agree to act in this capacity. I further agree to comply with the plete performance of my duties, and I am familiar with and not as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Shane Stults	14356 New Blossom Lane Winter Garden, FL 34787	⊒ Add
			□ Remove
			□ Change
			□ Add
			Remove
			Change
			A A A A A A A A A A A A A A A A A A A
			Remove Change
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			□ Remove
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Would like for both Brian Porter and Shane Stults to be equal partners in the Be	Positive L.L.C.
	<u></u>
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	5-2-1
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more Note: If the date inserted in this block does not meet the applicable statutory filing re document's effective date on the Department of State's records.	(optional) than 90 days after filing.) Pursuant to 605.0207 (3)(bequirements, this date will not be listed as the
If the record specifies a delayed effective date, but not an effective times (b). The 90th day after the record is filed.	e, at 12:01 a.m. on the earlier of:
Dated December 6 . 2018 . Signature of a member or authorized representative of a	a member
Typed or printed name of signee	a memoer

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Filing Fee: \$25.00