

L19 C000 10961

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 MAY -9 PM 4:45

MAY 14 2019

D CUSHING

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HEALTHY BELLY COMPANY 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:

<sup>10</sup>  
MICHAEL GREIARDI  
Name of Person

HEALTHY BELLY COMPANY LLC  
Firm/Company

7701 KNIGHTWING CIRCLE  
Address

FT MYERS FL 33912  
City/State and Zip Code

modernvibrance@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL J GREIARDI at (239) 410-7066  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 MAY -9 PM 4:45



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 4, 2019

MICHAEL J GEIARDI  
HEALTHY BELLY COMPANY LLC  
7701 KNIGHTWING CIRCLE  
FT MYERS, FL 33912

SUBJECT: HEALTHY BELLY COMPANY LLC  
Ref. Number: L19000010961

We have received your document for HEALTHY BELLY COMPANY LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 719A00006768

RECEIVED

2019 APR 15 PM 4:37  
SECRETARY OF STATE  
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 24, 2019

MICHAEL J GEIARDI  
HEALTHY BELLY COMPANY LLC  
7701 KNIGHTWING CIRCLE  
FT MYERS, FL 33912

SUBJECT: HEALTHY BELLY COMPANY LLC  
Ref. Number: L19000010961

We have received your document for HEALTHY BELLY COMPANY LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 719A00008257

RECEIVED

2019 MAY -9 AM 11:37

OFFICE OF THE CLERK  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Healthy Belly Company LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on JANUARY 9 2019 and assigned Florida document number L19000010961.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

RECEIVED  
DIVISION OF CORPORATIONS  
JAN 9 19 PM 4:45  
TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Shelly D GELARDI

New Registered Office Address:

SAME - 7701 KNIGHTWING CIRCLE

Enter Florida street address

FT MYERS

City

Florida

33912

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.*

Shelly D Gelardi

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**

[illegible]

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I AM SORRY IF I FILLED OUT INCORRECTLY - MY WIFE  
IS THE SOLE OWNER AND THE ONLY REGISTERED AGENT  
FOR HEALTHY BELLY COMPANY LLC. THIS IS ALL  
THAT I AM TRYING TO CHANGE.

E. Effective date, if other than the date of filing: \_\_\_\_\_ (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

5/2/19



Signature of a member or authorized representative of a member

Typed or printed name of signee