L1900001850

	<u></u>	
(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	. #)
PICK-UP		MAIL
(Bu	usiness Entity Nam	ne)
(Da	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
_	Office Use On	lv.

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•	(COVER LETT	ſER
TO: Registration Se Division of Cor			
	s Licensing LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Dario Echeverry		
		Name of Person	
	Altered Labs Licensing LL		
		Firm/Company	
	3350 NW 22nd Terrace, St		
		Address	
	Pompano Beach, FL 33069)	
		City/State and Zip C	lode
	echeverry.dario@gmail.con		nual report notification)
For further information c	oncerning this matter, please ca		
Dario Echeverry	c .	954	805-4664
	f Person	at (Area Code) Daytime Telephone Number
Enclosed is a check for th	ne following amount:		
□ S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing I Certified Cop (additional copy	y Certificate of Sta
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 issee, FL 32314	Regi Divi Clift 2661	EEET/COURIER ADDRESS: istration Section sion of Corporations on Building I Executive Center Circle ahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

0	F		کوریا د-	
	-	2019 AUG - 1	PH 6: 58	
Altered Labs Licensing LLC			· ii 0· 30	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jability Company)		e * . • .	
The Articles of Organization for this Limited Liability Company Florida document number <u>19000011850</u> .	were filed on $\frac{\text{January 10. 2019}}{\text{January 10. 2019}}$	and as	signed	
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "I	L.C."	
Enter new principal offices address, if applicable:	3350 NW 22nd Terrace, Suite 900			
(Principal office address MUST BE A STREET ADDRESS)	Pompano Beach, FL 33069			
Enter new mailing address, if applicable:	3350 NW 22nd Terrace. Suite 900			
(Mailing address MAY BE A POST OFFICE BOX)	Pompano Beach, FL 33069			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her <u>Name of New Registered Agent</u> : <u>Todd Stone, Es</u>	<u>e</u> :	nter the name	of the new	

Name of New Registered Agent: New Registered Office Address:	101 NE Third Avenue, Suite 1	250
	Enter	Florida street address
	Fort Lauderdale	, Florida ³³³⁰¹
	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

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AMBR =	Authorized	Member
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<u>Title</u>	<u>Name</u> Dario Echeverry	Address 3350 NW 22nd Terrace, Suite 900	Type of Action
MGR	- 	Pompano Beach, FL 33069	Add
			Remove
	Aaron Parkinson		Change
MGR			Add
		5300 Powerline Road Fort Lauderdale, FL 33309	Remove
		· 	🗆 Change
<u> </u>			Add
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		······································	Remove
			Change
			Add
			Remove
			🗖 Change

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

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