# L19 000075168

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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### **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT: (	colbuds LL		
	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:	
	Tan pa FinivCompany    Clauding   Nest for		
Finn/Company    GU 2   W   Floring C   Address   Finn/Company			
		Firm/Company	
	6421 W.	Florida	252
			21:57 2
	1910172	City/State and Zip Code	
	Claucho Flectric	or 14 10 M To be used for future annual report noti	fication) co
			52 <del>11</del>
Claudiur	Nostor	at ( <u>SB</u> ) 640-	855/
Name o	r rerson	Area Code Daytim	e Letephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			ction
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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

RECEIVED



### 2022 MAY 27 AM 7:51

## FLORIDA DEPARTMENT OF STATE CONTROL SAIL DIVISION of Corporations TALLAHASSIG. FL

April 6, 2022

**CLAUDNER NESTOR** 6421 N. FLORIDA AVE. D-1480 TAMPA, FL 33604

SUBJECT: COOLBUDS LLC Ref. Number: L19000075168

We have received your document for COOLBUDS LLC and your check(s) totaling \$44.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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) 245-6053.

Letter Number: 522A00008003

Yvette Scott Supervisor

www.sunbiz.org



June 30, 2022

CLAUDNER NESTOR 6421 N FLORIDA TAMPA, FL

SUBJECT: COOLBUDS LLC Ref. Number: L19000075168

We have received your document for COOLBUDS LLC and your check(s) totaling \$44.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

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.

Letter Number: 222A00014846

Diane Cushing Senior Section Administrator

www.sunbiz.org

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cay buds LLC.	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(Name of the Limited Liability Company) (A Florida Limited)  The Articles of Organization for this Limited Liability Company  Florida document number \( \bigcup \frac{19000}{19000} \) \( \bigcup \frac{166}{166} \).	Liability Company)  were filed on $\frac{(23)/(8)/(20)/9}{(100)}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab  ELECT R. T. C. P. R.  The new name must be distinguishable and contain the words "Limited Liabi	ISE LLC
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	D-1480 Tampa, F1 33604.
Enter new mailing address, if applicable:	6421 W Florida Ave
(Mailing address MAY BE A POST OFFICE BOX)	D-1480 Tumpa, F1 33604
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registere
Name of New Registered Agent:	<del></del>
New Registered Office Address:	Enter Florida street address
	, Florida
	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 amending Authorized each (s) authorized to manage, enter the title, name, and address of each person being adderer removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Remove
		□Remove	
		Change	
		□Remove	
		☐ Change	
		□Remove	
			□ Change
		□Add	
			□Remove
			□Change

Effective date, if other than the date of filing:	
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	0207 (3 d as th
he 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 ord is filed.	the
Dated 05 - 19 - 22	
Signature of a member or authorized representative of a member	
Signature of a member or authorized representative of a member  Claudiner Wester  Typed or printed name of signee	