

L19000146683

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

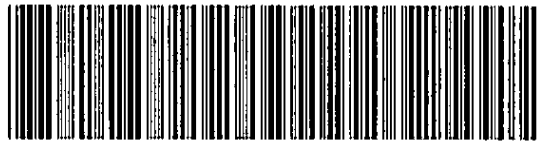
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300372321283

09/08/21--01009--008 **125.00

RECEIVED

SEP 07 2021

effective date 9-8-21

Amended

SECRETARY OF STATE
CLERK'S OFFICE

2021 SEP -7 AM 10:09

FILED

SEP 10 2021

A RAMSEY

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Full Press Juicery
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:

Lydia Hobbs
Name of Person
Full Press Juicery
Firm/Company
2036 Switch Grass Cir
Address
Ocoee, FL 34761
City/State and Zip Code
fullpressjuicery@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lydia Hobbs 407 701-1701
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

effective date 9-8-21

Full Press Juicery, LLC

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

FILED
2021 SEP -7 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on July 30, 2021 and assigned
Florida document number L19000146683.

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)

2036 Switch Grass Cir

Ocoee, FL 34761

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Lydia Hobbs

New Registered Office Address:

2036 Switch Grass Cir

Enter Florida street address

Ocoee

City

, Florida 34761

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Derrick F. Varner	710 Stadler Cove	<input type="checkbox"/> Add
		Cibolo, Texas 78108	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Karine Varner	710 Stadler Cove	<input type="checkbox"/> Add
		Cibolo, Texas 78108	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Brittany Varner	710 Stadler Cove	<input type="checkbox"/> Add
		Cibolo, Texas 78108	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

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.

Leslie H. H.

Lydia Hobbs

Typed or printed name of signee

Filing Fee: \$25.00