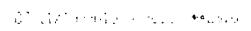
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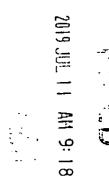
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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C. GOLDEN
JUL 2 3 2019

### **COVER LETTER**

TO: Registration Sec Division of Corp			
VEGAN W	ORLD, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	JANET V. LOWE		
		Name of Person	
	VEGAN WORLD, LLC		
		Firm/Company	<u>, , , , , , , , , , , , , , , , , , , </u>
	3511 TURENNE WAY		
		Address	
	WELLINGTON, FL. 334	49	
	WILSONJANET4@BELL	City/State and Zip Code SOUTH.NET	
	E-mail address: ()	to be used for future annual report notific	cation)
For further information co	ncerning this matter, please ca	all:	
JANET V. LOWE		561 308-9459	
Name of	Dorean	at () Area Code Daytime	Telephone Number
Name of	reison	Area Civile 1243 tille	receptione (various)
Enclosed is a check for the	e following amount:		
■ \$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:

TO:

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

## TO ARTICLES OF ORGANIZATION OF

VEGAN WORLD, LLC

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

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

(A Florid	la Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number	Company were filed on	and assigned and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)	RESS)	<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		records, <u>enter the name of the n</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et address
		Florida Zip Code
	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 th 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

### or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	JANET V. LOWE	3511 TURENNE WAY WELLINGTON, FL. 33449	Add
			Remove
			☐ Change
		4	Add
			Remove
			Change
			Add
		<del></del>	Remove
			□ Change
		<del></del>	Add
			Remove
			Change
		□ Remove	
	·	Change	
		<del></del>	Add
			Remove
			☐ Change

EMPLC	OYER IDENTIFICATION NUMBER: 84-2294940
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(If an effective date) Note: If the date	e, if other than the date of filing:
document s en	ective date of the Department of State's records.
	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: day after the record is filed.
Dated	
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
JA	NET V. LOWE
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00