# 19000187763

(Requestor's Name)
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(City/State/Zip/Phone #)
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C. GOLDEN FEB - 4 2020

## **COVER LETTER**

	Registration S Division of Co			
eus use		ition LLC		
SUBJEC	1:	Name of Lin	nited Liability Company	
The enclo	sed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please reti	urn all corresp	oondence concerning this matter	to the following:	
		James Zolman		
			Name of Person	<del></del>
		NSP Nutrition		
		<del></del>	Firm/Company	<del></del>
		608 N 3500 E		
			Address	<del></del>
		MENAN, ID. 83434		
			City/State and Zip Code	
		getnspnutrition@gmail.con		
		E-mail address: (	to be used for future annual report notif	ication)
For further	r information	concerning this matter, please c	all:	
James Zo.	lman		208 520-0818 at ()	
	Name	of Person	Arca Code Daytime	Telephone Number
Enclosed i	s a check for	the 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: Registration Section Division of Corporations

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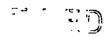
TO:

P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



		146 CM: -P LU 2: 51
ited Liability Compar (A Florida Limited L	ny as it now appears on our records.) ability Company)	
Liability Company	were filed on July 22, 2019	and assigned
lowing:		
of the limited liabi	lity company here:	
words "Limited Liabili	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
cable:	690 Main Street Safety Harlor, F	L 34695-3551
ET ADDRESS)		
<u> BOX)</u>	690 Main Street Safety Harbor, Fl	L 34695-3551
		nter the name of the ne
600 Main Come	<del>-</del>	
090 Main Street	Enter Florida street address	
Safety Harbor	l'Inrid	la 34695-3551
	lowing:  of the limited liability  words "Limited Liability  cable:  ET ADDRESS)  Vor registered off  office address here  Mike Williams  690 Main Street	ited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  Liability Company were filed on July 22, 2019  lowing:  of the limited Liability company here:  words "Limited Liability Company," the designation "LLC" or cable:  690 Main Street Safety Harbor, F  ET ADDRESS)  690 Main Street Safety Harbor, F  EBOX)  Nor registered office address on our records, enfice address here:  Mike Williams  690 Main Street address  690 Main Street address

### 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.

City

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>	Address	Type of Action
MGR	James Zolman	608 N 3500 E MENAN, ID 83434	
		<del></del>	■ Remove
			□ Change
MGR	Mike Williams	690 Main Street Safety Harbor, FL 34695-3551	Add
			☐ Remove
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effec <u>te:</u> It	e date, if other tive date is listed the date insent's effective	d, the date m rted in this l	ust be specif block does	ic and can not meet	the applic	able statu	iling or more tory filing	re than 90 d requireme	_ (optiona lys after fili nts, this da	ng.) Pursuani	t to 605,020 be listed a
reco he 9	rd specifie Oth day af	s a delaye ter the re	ed effecti cord is fi	ve date led.	, but no	t an effe	ective tir	ne, at 1	2:01 a.n	າ. on the	earlier o
ed_	2/12/19		· · · · · · · · · · · · · · · · · · ·	<u> </u>		·					
			~~~	31	~						
			Signature	of almemi	per or author	orized repre	esentative o	f a member			
	James Zol	- 11		U							

Page 3 of 3

Filing Fee: \$25.00