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	(Requestor's Name)
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COVER LETTER

	Life, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	James C. Wade III		
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	It's A Tree Life, LLC		State and Ztp Code d for future annual report notification) Address State and Ztp Code d for future annual report notification) at (
		Firm/Company	<u></u>
	BJECT: It's A Tree Life, LLC		
		Address	
	Plant City, FL, 33563		
		City/State and Zip Code	
		On house of the former around course of	deli meterral
For further information c	It's A Tree Life, LLC Name of Limited Liability Company		
Brandi Sharpe			
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			ection
Division of C	orporations	Division of Co	orporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

It's A Tree Life, LLC 6.00 22 1110: 33

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

The Articles of Organization for this Limited Liability Comp Florida document number $\frac{L19000187815}{L19000187815}$	pany were filed on July 22, 20	and assigned
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	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		_
(Principal office address MUST BE A STREET ADDRES.	<u>s)</u>	
	1106 N. Shannon Ave	
Enter new mailing address, if applicable:	Plant City, FL, 33563	
(Mailing address MAY BE A POST OFFICE BOX)	- min City, FE. 33303	
Name of New Registered Agent: New Registered Office Address:	Enter Florida stre	et address
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Ag	gent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	olete performance of my du as provided for in Chapte	ties, and I am familiar with and r 605, F.S. Or, if this document is
		nature 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 C. Wade III	1106 N. Shannon Ave.	■Add
		Plant City, FL. 33563	□Remove
		(Address change)	■Change
MGR	Brandi N. Sharpe	1106 N. Shannon Ave	□Add
		Plant City, FL. 33563	
		(Address change)	≡ Change
MGR	John Geschwender	1802 S. Saint Cloud Ave.	■Add
		Valrico, FL. 33594	□Remove
			□Add
			□Remove
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			□Remove
			□Change

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Filing Fee: \$25.00