119000254531

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

Office Use Only



700339867987

02/06/20--01012--018 **25.00

2020 FFFS-6 PH 4: 12

Mund

MAR 0 2 2020 I ALBRITTON

COVER LETTER

Tallahassee, FL 32314

то:	Registration Se Division of Cor		e	
CUB IE	Green Stree	et Vapor LLC		
SUBJE	UI:	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Christopher M. Ray		
			Name of Person	
		Green Street Vapor LLC		
			Firm/Company	
		2575 South Highway 17-9	2	
			Address	
		Cassleberry, Florida 3270	7	
			City/State and Zip Code	·//···································
		chris@greenstreetvapor.com	n to be used for future annual report	notification)
For furtl	her information o	eoncerning this matter, please concerning this matter.		normeations
Marshal	II S. Harris	_	407 740-7378	
	Name o	of Person	at () Area Code Day	ytime Telephone Number
Enclose	d is a check for t	he following amount:		
	.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 Addre Registration Division of C P.O. Box 632	Section Corporations		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marks of Mr. 72

Green Street Vapor LLC

(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 Company	were filed on October 9, 2019	and assigned
Florida document number 1.19000254531		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.IC."
Enter new principal offices address, if applicable:	2575 South Highway 17-92, Unit #18	2
(Principal office address MUST BE A STREET ADDRESS)	Casselberry, Florida 32707	<u> </u>
Enter new mailing address, if applicable:	575 S. Highway 17-92, Suite # 182	
(Mailing address MAY BE A POST OFFICE BOX)	Casselberry, Florida 32707	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the na	nme of the new registere
		
New Registered Office Address:	Enter Florida street address	
	Ciņ	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 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
			☐Change
			□Add
			□Remove
			Change
			□Add
			□ Remove
			□Change
			\ \ \ _Add
			□Change
			DbA□
		<u></u>	Remove
			☐ Change
			Remove
			☐ Change

				_
				_
				_
		<u> </u>		
				_
				
	. <u> </u>			
			-**	··-
Offective date, if other than the	date of filing:		(optional)	
f an effective date is listed, the date mu Note: If the date inserted in this b	st be specific and cannot be prior to	o date of filing or more than 9	0 days after filing.) Pursuant to 6	505.020 isted a
locument's effective date on the E		ore statutory ming require	mena, and date will not be i	isted u.
	e date, but not an effective tin	ne, at 12:01 a.m. on the ea	rlier of: (b) The 90th day a	fter the
d is filed.	2020			
d is filed.	2020	<u>-</u> ·		
d is filed.	2020	_·		
e record specifies a delayed effective d is filed. Dated Man La	Signature of a pember or author	ized representative of a mem	lber	