

Jun. 06. 2023 9:40AM

No. 1795 P. 1

8/6/23, 9:02 AM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000203834 3)))



H230002038343ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : PETERSON & MYERS PA
Account Number : I20080000078
Phone : (863)683-6511
Fax Number : (863)688-8099

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: bkleinhenz@purelynat.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PURELY NATURAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

T. LEMIEUX
JUN - 7 2023
Help

Jun. 6. 2023 9:41AM

No. 1795 P. 2

DocuSign Envelope ID: 8A21EC07-4936-4A65-B444-7B08B9F28A57

COVER LETTER

((H23000203834 3)))

TO: Registration Section
Division of Corporations

SUBJECT: PURELY NATURAL, LLC

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:

David A. Miller

Name of Person

Peterson & Myers, P.A.

Firm/Company

225 East Lemon Street, Suite 300

Address

Lakeland, Florida 33801

City/State and Zip Code

bkleinhenz@purelynat.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David A. Miller

at (863)

683-6511

Name of Person

Area Code

Daytime Telephone Number

Enclosed is 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
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

((H23000203834 3)))

Jun. 16. 2023 9:41AM

No. 1795 P. 3

DocuSign Envelope ID: 8A21EC07-4936-4A85-B444-7B09B9F28A57

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

((H23000203834 3)))

PURELY NATURAL, 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 November 4, 2019 and assigned
Florida document number L19000264171.

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)

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:

New Registered Office Address:

Enter Florida street address

Florida

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 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

((H23000203834 3)))

Jun. 6. 2023 9:41AM

(((H23000203834 3))) No. 1795 P. 4

DocuSign Envelope ID: 8A21EC07-4936-4A85-B444-7B09B9F28A57

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, P	Robert J. Kleinhenz	3928 Anchuca Drive, Suite 17	<input type="checkbox"/> Add
		Lakeland, Florida 33811	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
VP	Carol Andrea Bonivento Rivera	3928 Anchuca Drive, Suite 17	<input checked="" type="checkbox"/> Add
		Lakeland, Florida 33811	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

(((H23000203834 3)))

No. 1795 P. 5

DocuSign Envelope ID: 8A21EC07-4936-4A85-B444-7B09B9F28A57

((H23000203834 3)))

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated June 6, 2023

Designed by:

Robert J. Kleinberg

-6124CFC90715498

Signature of a member or authorized representative of a member

Robert J. Kleinhenz

Typed or printed name of signee

v(((H23000203834 3)))

Filing Fee: \$25.00