L19000291045

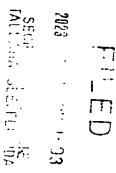
(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	

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COVER LETTER

TO:

TO: Registration Se Division of Cor				
AGunther C	Group, LLC			
SUBJECT:	Name of Lim			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Tim Gunther			
		Name of Person		
	AGunther Group, LLC			
		Firm/Company		
	203 N. 2nd Street		2023 SEC	
		Address		
	Fort Pierce, FL 34950		÷ 1	
		City/State and Zip Code		
	tim@floridahempcollective		=	
For further information c	E-mail address: (oncerning this matter, please ca	to be used for future annual report notification) all:		
Tim Gunther	•	321 246-5085 at ()		
Name o	f Person	Area Code Daytime Telephon	e Number	
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	660.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration S		Street Address: Registration Section		
Division of Corporations		Division of Corporation		
P.O. Box 6327		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
Tallahassee, FL 32314		2413 IN. IVIONTOE STREET,	Suite 610	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit	ed Liability Compa (A Florida Limited l	ny as it now appears on our re Liability Company)	ecords.)	
The Articles of Organization for this Limited Li Florida document number L19000291045	ability Company	were filed on November 2	5, 2019	and assigned
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the designation	"LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		203 N. 2nd Street	Fin	22
		Fort Pierce, FL 34950		23
	 			
Enter new mailing address, if applicable:		203 N. 2nd Street	10. 10. 0.	·
(Mailing address MAY BE A POST OFFICE BOX)		Fort Pierce, FL 34950		- D
				ပ္
3. If amending the registered agent and/or ragent and/or the new registered office address Name of New Registered Agent:			nter the name of	the new regist
-	203 N. 2nd Stre	out.		
New Registered Office Address:	200 14, 200 500	Enter Florida street a	uddress	 – – – – – – – – – – – – – – – – –
	Fort Pierce		_, Florida <u>34950</u>	
		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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person, being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			Remove
			TChange
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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. Signature of a member or authorized representative of a member **Timothy Gunther** Typed or printed name of signee

Filing Fee: \$25.00