Florida Department of State Distission of Corporations Electionic Filing Cover Sheet

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	To:	Division of Corporations
		Fax Number : (850)617-6383
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The co	සුපිදු	Account Name : COMPUTERSHARE
, ,	- さい 出資金	Account Number : 110432003053
		Phone : (561)694-8107
		fax Number : (561)214-8442
		
		e email address for this business entity to be used for future al report mailings. Enter only one email address please.**
	- Email	L Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BNATURAL ORGANIC PRODUCTS LLC

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Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BNatural Organic Products LLC			
(Name of the Lim	ited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)	.
The Articles of Organization for this Limited Florida document number L20000013322	Liability Company were f	on 01/06/2020	and assigned
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liability co	mpany here:	
Habitat Organic Products LLC			
The new name must be distinguishable and contain the	words "Limited Liability Com	pany," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE			
-			7:
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	: BOX)	12.00	,
			:
			<u>;</u>
B. If amending the registered agent and/or agent and/or the new registered office addresses		on our records, <u>enter the</u>	name of the new register
Name of New Registered Agent:	Abitos PLLC		····
New Registered Office Address:	255 Aragon Avenue, Second Floor Enter Florida street address		
	Coral Gables	, Florid	a 33134 Zip Code
	City	¥	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the propactions of the obligations of my position as register the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	per and complete perfor, istered agent as provide registered office addres	mance of my duties, and I d for in Chapter 605, F.S. is, I hereby confirm that th	am familiar with and Or, if this document is
company has been notified in writing of this	s change.		des. Attorney-in-Fac

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>	Name	Address	Type of Action
MGR	FRANCIA LOPEZ FRAGOSO	2490 Eagle Run Dr	DAdd
		Weston, FL 33327	7.5
			□Change
MGR	Francia Fuentes	2490 Hagle Run Dr	≡ ∧dd
		Weston, F1. 33327	
			Change
		***************************************	□Add
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ffective date, if other than the date of an effective date is listed, the date must be specif	fic and cannot be prior to d	ate of filing or more than 90	(optional) days after filing.) Pursuant to 605 020
iote: If the date inserted in this block does	not meet the applicable	statutory filing requiren	nents, this date will not be listed as
ocument's effective date on the Departmen	it of State's records.		
record specifies a delayed effective date, bu	ut not an effective time,	at 12:01 a.m. on the ear	ier of: (b) The 90th day after the
f is filed.			
ated November 30th	2023		
1/2/			
	<i>'//</i> /		

Typed or printed name of signee