

L20 CCC 16Z3Z0

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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JUL 13 2020

2020 JUL 13 PM 1:13

07/21/20

AUG 22 2020

S. YOUNG

COVER LETTER.

7/8/20

Jennifer Calderon

813.459.2539

37046 pepper Dr.

Zephyr Hills, Fl. 33541

To Whom it may concern:

Please make the following changes to my business. Please remove Urbano Calderon Jr. from the Business and add Brittany Wilson as Authorized Member

The new business address is

37046 pepper Dr.

Zephyr Hills, Fl. 33541

phone number (813) 459-2539

Thank you.

Jennifer Calderon

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fruit Paradise Smoothies 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:

Jennifer H. Calderon.
Name of Person

Firm/Company

37046 pepper Dr.
Address

Zephyrhills, fl. 33541.
City/State and Zip Code

Jennifer Halley2985@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Calderon. at 813.459.2539.
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

fruit Paradise Smoothies 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 6/12/20 and assigned
Florida document number L20000162320.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

fresh fruit Paradise LLC

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)

37046 pepper Dr.
Zephyr Hills, FL 33541

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:

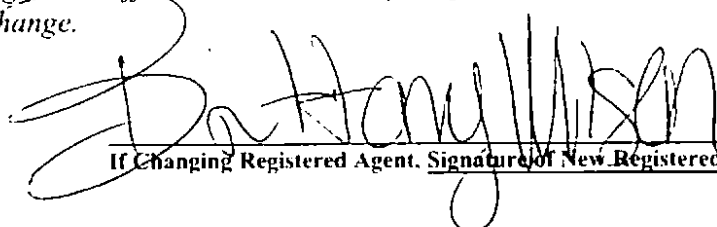
* Please remove

Brittany Wilson urbanc
37046 pepper Dr. calden
Enter Florida street address

Zephyr Hills, Florida 33541
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.


Brittany Wilson
If Changing Registered Agent, Signature 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Urbano Calderon	5437 Cape Hatteras Dr Clermont, fl. 34714	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Brittany Wilson	37046 pepper Dr Zephyrhills, fl. 33541	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jennifer Calderon	37046 pepper Dr Zephyrhills, fl 33541	<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input checked="" 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

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

Please add new EIN# 85-1810750

Please remove Urbano Calderon Jr.
from all paper work to the business

E. Effective date, if other than the date of filing: July 1, 2020 (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

7/8/20

Signature of a member or authorized representative of a member

Typed or printed name of signee