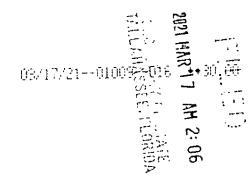
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	





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COVER LETTER

`TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
SUBJECT: he Weeding Company ST
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rachel Schuette Name of Person
Firm/Company
22700 Southshare Drive
Land O'Lakes, FL 34639 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rachel Schuette at (608) 461-0284 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: Second Filing Fee Second Filing Fee & Second Filing Fee & Second Filing Fee & Second Filing Fee & Certificate of Status & Certificate of St
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Weeding (a	mnca. 11(= =
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 6/15/ ZOCANT assigned
Florida document number <u>L700016533</u> ,	
This amendment is submitted to amend the following:	2: 06 2: 06
A. If amending name, enter the new name of the limited liab	
Welleed LLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Rachel Schrette
(Principal office address MUST BE A STREET ADDRESS)	22700 Southshore Drive
	Land O' Lakes, FL 34639
	Rachel Schuette
Enter new mailing address, if applicable:	- 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Mailing address MAY BE A POST OFFICE BOX)	1 2700 Southshore Drive
	Land U' Lales, + C Syl S
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent: \(\sum_{\subset} \such	iel Schuette
New Registered Office Address: ZZZC	00 Southshore Drive

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.

TO A O NA IL

Land O' Lalles, Florida 346

AMBR = Authorized Member

<u>Title</u>	Name		Type of Action
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