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C. GOLDEN 0CT - 5 2020

COVER LETTER

TO: Registration Section

Division of Cor	porations				
	E EVER LLC				
SUBJECT:	Name of Lim	ited Liability Company	 -		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	LOVETTE DOBSON				
		Name of Person			
	INCFILE.COM LLC				
		Firm/Company	 		
	17350 STATE HWY 249	STE 220			
		Address			
	HOUSTON, TX 77064				
		City/State and Zip Code			
	EFILE1234@INCFILE.CO				
	E-mail address: (to be used for future annual report noti	fication)		
For further information c	oncerning this matter, please co	all:			
LOVETTE DOBSON		855 829-9090 at ()			
Name o	f Person		e Telephone Number		
Enclosed is a check for the	ne 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 S Division of C P.O. Box 632 Tallahassee, I	Section Corporations 17	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Fallahassee e Street, Suite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BEST LIFE EVER 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 $\frac{06/24/2020}{1}$ and assigned Florida document number L200(X)176026 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." 5521 YELLOWFIN COURT Enter new principal offices address, if applicable: NEW PORT RICHEY, FL 34652 (Principal office address MUST BE A STREET ADDRESS) 5521 YELLOWFIN COURT Enter new mailing address, if applicable: NEW PORT RICHEY, FL 34652 (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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_, Florida ___

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>	Address	Type of Action
AMBR	ANGELENID OCHOCKI	5521 YELLOWFIN COURT	□Add
		NEW PORT RICHEY, FL 34652	□Remove
			☐ Change
	 .		□Add
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Effective date, if other that	the date of filing:		(optional)
If an effective date is listed, the dat Note: If the date inserted in the	e must be specific and cannot be prior	to date of filing or more than 90 da	(optional) Assign (1997) Aursuant to 605,0207 (1997) Assign (199
document's effective date on t	he Department of State's records		ms, this date will not be listed as t
e record specifies a delayed eff	ective date, but not an effective ti	ime, at 12:01 a.m. on the earlie	r of: (b) The 90th day after the
ord is filed.			
IIII V 31	2020		
Dated		<u></u> ·	
A olo	nie Ochochi	•	
<u>Angell</u>	Signature of a member or auth	orized representative of a member	
-		representative or a member	
ANGELENID OC	HOCKI - AMBR		
·	Typed or print	ed name of signee	