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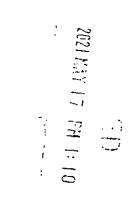
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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To whom it may concern,

My name is Marin Camps &	. On this <u>26</u>	الم ما من ملا	Annil	2021
My name is Main Con 415	On this <u>∠.//</u> _	th day of	17PM	2021,

I am signing a final letter stating that I am resigning from CBD With A Twist LLC located in Vero Beach FL. I am separating from CBD With A Twist LLC and all entities related to the company.

I have done this of my own free will with no coercion. Per the articles of organization formed by

Aaron German. Danita Jones and myself Morin Caryor.

I am owed no dues: I will not receive any benefit of any form with my separation.

Signed this 26 th Day of April 2021.

Witness Signature (s)

Print Name

Marin Campos

Marin angris

Print Name

Haron Grounder

COVER LETTER

Registration Section

TO:

Division of Cor	rporations		
	A Twist LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Aaron German		
	_	Name of Person	-
	Green Leaf Fusions		
		Firm/Company	
	2597 Bella Vista Cir		
		Address	
	Vero Beach FL 32966		
		City/State and Zip Code	
	greenleaffusions@gmail.co	m to be used for future annual report no	(Highton)
For further information c	oncerning this matter, please o	·	(meakva)
Aaron German		772 453-3769	
Name o	f Person	Area Code Daytii	ne Telephone Number
Enclosed is a check for the	he 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 Addres Registration 9		Street Address: Registration So	ection
Division of C	Corporations	Division of Co	rporations
P.O. Box 632 Tallahassee, 1		The Centre of 2415 N. Monro	rananassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CBD With A Twist 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 July 6th 2020 and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Green Leaf Fusions L.L.C. The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 2597 Bella Vista Cir. Enter new principal offices address, if applicable: Vero Beach FL 32966 (Principal office address MUST BE A STREET ADDRESS) 2597 Bella Vista Cir. Enter new mailing address, if applicable: Vero Beach FL 32966 (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

Zip Code

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>	Type of Action
AMBR	Marin Campus	350 7th Rd SW	□Add
		Vero Beach, FL 32960	Remove
			□Change
		 	□Add
			□Remove
			□ Change
			□Add
			□Remove
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	04/23/2021
If an eff Note:	ve date, if other than the date of filing:
ie recor ord is fil	d 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 ed.
Dated	··
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00

Typed or printed name of signee