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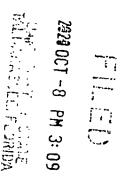
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration Sec Division of Corp				
The Modern	n Apothecary Shop, LLC	,	•	
SUBJECT:			· · · · · · · · · · · · · · · · · · ·	
	Name of Lin	nited Liability Company	·	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspon	idence concerning this matter	to the following:		
	Artyn F. Rull Valenciaga			
		Name of Person	·	
	The Modern Apothecary	Shop, LLC		
		Firm/Company		
	2045 SW 82nd Court		- (7523 OCT
	·	Address	•	0CT
	Miami, FL 33155)	8
	arlynrull@mac.com	City/State and Zip Code		PM 3: 09
		to be used for future annual report noti	fication)	图 9
	ncerning this matter, please c			
Arlyn F. Rull Valenciaga		786 486-0207		
Name of	Person	at ()	e Telephone Number	
Enclosed is a check for the	e following amount:			
□ \$25,00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	Certified	te of Status &
<u>Mailing Address</u> Registration Se		<u>Street Address:</u> Registration Sec	ction	
Division of Co		Division of Cor		
P.O. Box 6327	·	The Centre of T	altahassee	
Tallahassee, F	1. 32314	2415 N. Monro	e Street, Suite 8	10

Tallahassee, FL 32303

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

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our record	<u>s.</u>)
(A Florida Limited I	hability Company)	
Articles of Organization for this Limited Liability Company were filed on		and assigned
lorida document number		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
The Modern Apothecary, LLC		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC	or the abbreviation "L.L.C,"
nter new principal offices address, if applicable:		7 . 2 . 2
Principal office address MUST BE A STREET ADDRESS)		23
The that office maters most be A STREET ADDRESS		BCT
		. æ
	PO Box 145362	P 1
• •		
Mailing address MAY BE A POST OFFICE BOX)	Cordi (danes, 11, 35/114-57.702	
. If amending the registered agent and/or registered office a	PO Box 145362 Coral Gables, FL 33114-5362 ddress on our records, enter	PH 3: 09
If amending the registered agent and/or registered office a nt and/or the new registered office address here:	ddress on our records, <u>enter</u>	the name of the new reg
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Flo	orida Zip Code

Thereby 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
		····	□ Change
			□Remove
			☐ ☐ ☐ Change
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Tective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing	(opti	o nal) Hiling VP	urcuant ta	605 O
ote: If the date inserted in this block does not meet the applicable statutory ocument's effective date on the Department of State's records.	filing requirements, thi	s date wi	II not be	listed
realities of the title of the 12 character of State 3 records.				
record specifies a delayed effective date, but not an effective time, at 12:01 is filed.	a.m. on the earlier of: (b) The S	90th day a	after t
October 2 2020				
ated				
(Nell ve				••
Signature of a member or authorized represen	envilous seller ess sando se			