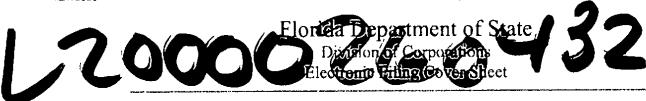
12/7/2020

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_\_

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SILVER LINING WELLNESS LLC

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Registration Section

TO:

## **COVER LETTER**

SILVEF	Corporations R LINING WELLNESS LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles	of Amendment and fee(s) are subt	nitted for tiling.	
Please return all corre	spondence concerning this matter t	to the following:	
	Cheyenne Moseley		
		Name of Person	
	Legalzoom.com, Inc.		
		Firm/Company	
	101 N Brand Blvd 11th Fl		
		Address	
	Glendale, CA 91203		
	<u></u>	City/State and Zip Code	
	silverliningwellness2020@g	gmail.com to be used for future annual report not	itication)
For further informatic	on concerning this matter, please ca		,
Cheyenne Moseley		800 773-0888	
Nar	ne of Person	at ()	ne Telephone Number
Enclosed is a check for	or the following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MZ	AHLING ADDRESS:	STREET/COUR	IER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## To:

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

(A Florida Lim	ompany as it now appears on our records.) mied Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number <u>L20000260432</u> .	pany were filed on 08/24/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited I	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 ADDRES)	<u>S)</u>	1026 DE
		<u></u>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	1 65 11	
B. If amending the registered agent and/or registere		enter the name of the
		enter the name of the
		enter the name of the
registered agent and/or the new registered office address	s here:	enter the name of the
Name of New Registered Agent:	s here:  Enter Florida street oddress	da

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, 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
MGR	Tammy Lyn Glass	411 Cypress Dr. Haines City, FL 33844	Add
			□ Remove
			□ Change
			Add
			☐ Remove
			Change
			Add
			- Change
	<del></del>		
			Remove
			Change
		<u> </u>	☐ Remove
			☐ Change
	<del></del>		
			☐ Remove

the rec	ord specifies 90th day afte	a delayed eff	ective da			fective tii	ne, at 12	:01 <b>a</b> .m. (	on the ear	lier of:
(if an effe <u>Note:</u> l	ve date, if othe ective date is listed. If the date inserte ent's effective da	the date must be sed in this block o	pecific and does not me	cannot be pri ect the appi	ior to date of licable stati	tiling or mo story filing	e than 90 day	(optional) is after filing.) is, this date	Pursuant to 6 will not be li	05.0207 ( sted as t
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