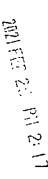
k20 000 305218

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #)
(Address)
(Address)
<u> </u>
<u> </u>
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Cassial least estimate to Filips Officer
Special Instructions to Filing Officer:



300360272893

02/25/21--01023--010 **25.00



Office Use Only

MuhiR

COVER LETTER

TO:	Registration Sec Division of Corp					
SUBJEC	VAPNM, LI			•		
50 D			ited Liability Company			
The enct	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspor	ndence concerning this matter	to the following:			
		Christiaan Volkert				
			Name of Person			
		JAB Holdings LLC				
			Firm/Company			
4520 Louisville Rd						
		Bowling Green, KY 42101				
		City/State and Zip Code				
		Sasha@eastburnlaw.com				
		E-mail address: (to be used for future annual report notif	ication)		
For furth	er information co	ncerning this matter, please c	all:			
Thurmar	n K Pearce Minch	ew III	404 936-2080 at ()			
	Name of	Person		Telephone Number		
Enclosed	l 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 (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address		Street Address:			

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VAPNM LLC	
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Compan	pears on our records.)
The Articles of Organization for this Limited Liability Company were filed on Florida document number $\frac{1.20000305218}{1.000000000000000000000000000000000000$	9/28/2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," the	he designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on ou agent and/or the new registered office address here:	司
Name of New Registered Agent:	N)
New Registered Office Address: Finter	Florida street address N
	, Florida
City	Zip Code

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.

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	Chewcon LLC	16 South Lake Drive	
		Santa Rosa Beach, FL 32459	■Remove
AMBR	Hopestrong LLC	16 South Lake Drive	= Add
		Santa Rosa Beach, Fl. 32459	□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
	·····		
			□Remove
			□Change
			
			□Remove
			□Channa.

). If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
_	
-	
_	
Note: If	e date, if other than the date of filing:
the record cord is file	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 i.
Dated _	2021 ·
	Signature of a member or authorized representative of a member
	Chewcon LLC Thurman Kenneth Pearce Minchew III (AMBR) Typed or printed name of signee

Filing Fee: \$25.00