# L2000306375

(Re	equestor's Name)	
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#### **COVER LETTER**

	Registration S Division of Co			
cuninc		lealth and Wellness, LLC		
SUBJEC	,l;	Name of Lin	ited Liability Company	_
The enclo	osed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all corresp	ondence concerning this matter	to the following:	
		Jennifer Munksgard		
	Name of Person			
To Your Health and Wellness, LLC				
Firm/Company		<del></del>		
		12918 SW 28th Place		
Address		<u> </u>		
Archer, Ft 32618				
			City/State and Zip Code	<del></del>
		Jmunksgardnp@outlook.co		- 49
For furth	er information	e-mail address: t	to be used for future annual report notification) all:	
Jennifer i	Munksgard		352 5355043	
	Name	of Person	Area Code Daytime Telephone Num	ber > 1
Enclosed	is a check for (	the following amount:		Th 2tt
□ \$25.0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)	Filing Fee, cate of Status & ed Copy nat copy is enclosed)
	<u>Mailing Addre</u> Registration		Street Address: Registration Section	
1	Division of 0	Corporations	Division of Corporations	
				: 810
Enclosed  □ \$25.0	Name is a check for to the following of the following is a check for the f	ss: Section Corporations 27	at () Area Code Daytime Telephone Num  S55.00 Filing Fee & S60.00 Certified Copy Certifi (additional copy is enclosed) Certifi (additional copy is enclosed)  Street Address: Registration Section	Filing Fee. feate of Status & ed Copy nat copy is enclosed)

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

To Your Health and Wellness, 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 9/29/2020 \_\_\_\_\_ and assigned Florida document number L2000030637 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." 12918 SW 28th Place Enter new principal offices address, if applicable: Archer, Fl 32618 (Principal office address MUST BE A STREET ADDRESS) 12918 SW 28th Place Enter new mailing address, if applicable: Archer, FL 32618 (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: 1 Name of New Registered Agent: NA 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
MGR	Erin Caudle		□Add
			Remove
			∫ ` □Change
			□Add
			□Remove
			Change
<del></del>			
			□Remove
			□ Change
			∃Remove
		1.44-	Change
			□Add
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## Page 2 of 3

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with the	remove Erin Candle from s Corp. Thank you	,
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		> <u>&gt;</u>
ective date, if other than	7/1/2021	<u>~</u> (optional)
n effective date is listed, the date <b>te:</b> If the date inserted in thi	must be specific and cannot be prior to date of filing of is block does not meet the applicable statutory fi- ne Department of State's records.	or more than 90 days after filing.) Pursuant to 605
record specifies a dela The 90th day after the	yed effective date, but not an effective record is filed.	e time, at 12:01 a.m. on the earli
ted	2021	
(	Signature of a member or authorized representate	
		<del> </del>

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Filing Fee: \$25.00