## 121000250006

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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August 18, 2021

TAYLOR BROWN 2220 GLORIA CIRCLE APT 90 PENSACOLA, FL 32514

SUBJECT: THE INTUITIVE FOODIE, LLC

Ref. Number: L21000250006

We have received your document for THE INTUITIVE FOODIE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 521A00019771

Alecia Rivers
Regulatory Specialist II

www.sunbiz.org

## COVER LETTER

TO:

TO: Registration of Division of	on Section f Corporations		
a - 1	muitive Foodie, LLC		
SUBJECT:	Name of I	Limited Liability Company	
The enclosed Article	es of Amendment and fee(s) are:	submitted for filing.	
Please return all cor	respondence concerning this mat	ter to the following:	
	Taylor Brown		
		Name of Person	
	~	Firm/Company	<del></del>
	2220 Gloria Circle Apt		
	Pensacolo, Fl 32514	Address	
		City/State and Zip Code	<del></del>
	Taylork.kay@gmait.com	· · · · · · · · · · · · · · · · · · ·	
	É mail addres	is: (to be used for future annual repor	t notification)
For limiter informat	ion converning this matter, pleas	e call:	
Taylor Brown		850 529529i	
N:	ume of Person	Area Code Da	aytime Telephone Number
Enclosed is a check	for the following amount:		
■ \$25.09 Filing F.	ec El \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Ac Registrat	ddress: ion Section	<u>Street Addre</u> Registration	
Division	of Corporations	Division of	Corporations
P.O. Box			of Tallahassee
i atlanass	see, FL 32314	2410 N. MC	onroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Intuitive Foodie, LLC		
( <u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our records ed Liability Company)	<u></u> )
The Articles of Organization for this Limited Liability Compa	iny were filed on 2/20/2021	and assigned
Florida document number L21000250006		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
Tayloring Nutrition, LLC		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC"	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)		3 (6.3)
		<u> </u>
B. If amending the registered agent and/or registered office	an uddrage an our woonds, ontor t	the name of the new register
agent and/or the new registered office address here:	ce address on our records, emer	ine name of the new registers
		19 52
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		rida
	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 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
			□Add
			Remove
			Change
		·	
			□Remove
			Change
			□Add
			□Remove
			□ Add
			□Remove
			□Remove
			□Add
			Remove
			□ Change

Effective date, if other than the date of filing:  (optional)  (an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0267  Some: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The effective date on the Department of State's records.  The effective date on the department of state's records.  The statutory filing requirements, this date will not be listed as document's effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the distilled.  The effective date of a member of an ember of a member of a memb		<u> </u>	·		
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Signature of a member or authorized representative of a member					
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Filing Fee: \$25.00