

h21000334837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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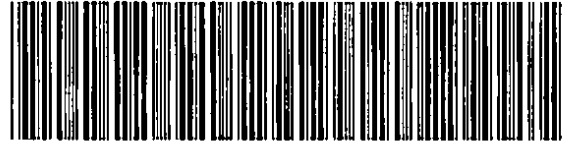
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Urban Herbals LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Monique Murray
Name of Person
Urban Herbals LLC
Firm/Company
7643 Gate Parkway Suite 404
Address
Jacksonville, FL 32256
City/State and Zip Code
urbanherbalsllc@gmail.com
E-mail address: (to be used for future annual report notification)

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2021 NOV 19 AM 11:58
TALLAHASSEE, FL
SECRETARY OF STATE

For further information concerning this matter, please call:

Monique Murray at (561) 718-4016
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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:

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

Street Address:

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**

Urban Herbals 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 July 23, 2021 assigned
Florida document number L21000334837

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

7643 Gate Parkway
Suite 104-1474
Jacksonville, FL 32256

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7643 Gate Parkway
Suite 104-1474
Jacksonville, FL 32256

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:

Name of New Registered Agent:

Kazil Tunisi

New Registered Office Address:

7643 Gate Parkway Ste 104-147

Enter Florida street address

Jacksonville

City

Florida

32256

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.

Kazil Tunisi
If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

MR Name
~~AMBR~~ Kafil Tunsill
Registered
Agent

~~5201~~ 7643 Gate Parkway ☒ Add
Suite 104-1474 ☐ Remove
Jacksonville, FL 32256 ☐ Change

AMBR Gavyn McDorland 76+3 Gate Parkway 2910 51E 104-1474 ☒ Add
Jacksonville, FL 32256 ☐ Remove

76+3 Gate Parkway
~~2910~~ 51E 104-1474 ☒ Add

Jacksonville, FL 32256 ☐ Remove

☐ Change

☐ Add
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☐ Add

☐ Remove
☐ Change

_____ ☐ Add
 _____ ☐ Remove

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_____ ☐ Remove
 _____ ☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: (Filing Date) (optional)

(If 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated November 16, 2021

Monique Murray
Signature of a member or authorized representative of a member
Monique Murray
Typed or printed name of signee