

L22000526545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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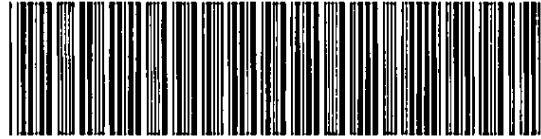
(Business Entity Name)

(Document Number)

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FILED  
2023 JUN 11 AM 9:47  
TALLAHASSEE, FL

3/13/2023

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **WOLFTRAX.LIFE 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:

**LEANA GUZMAN**

Name of Person

**ZENBUSINESS INC.**

Firm/Company

**336 E College Ave, Ste 301**

Address

**Tallahassee, FL 32301**

City/State and Zip Code

**FULFILLMENT@ZENBUSINESS.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**LEANA C/O ZenBusiness Inc.** at **(844) 493-6249**

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



# zenbusiness

**Jan 6, 2023**

Florida Secretary of State  
Division of Corporations P  
2415 N Monroe St Suite 810  
Tallahassee, FL 32303

**RE: WOLFTRAX.LIFE LLC**

To Whom It May Concern:

Attached please find the executed **ARTICLES OF AMENDMENT** for the above referenced.  
Please review and file the attached document on a routine basis. Please note that this document is signed with a conformed signature.

**PLEASE DO NOT INCLUDE THIS COVER PAGE IN THE FILING EVIDENCE.**

Once completed please forward the filed confirmation or notification to the address listed below:

**ZenBusiness Inc  
Attention: Liana Guzman  
336 E College Ave, Ste 301  
Tallahassee, FL 32301**

If you have any questions, please feel free to contact me at 844-493-6249 or at [fulfillment@zenbusiness.com](mailto:fulfillment@zenbusiness.com).

Thank you.

*Liana Guzman*  
Liana Guzman

ZenBusiness Customer Success

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

WOLFTRAX.LIFE LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2023 JAN 11 AM 9:47

The Articles of Organization for this Limited Liability Company were filed on 12/15/2022 and assigned  
Florida document number L22000526545

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."

**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 our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

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 Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

[illegible]

(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)

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 Jan 6, 2022

Signature of a member or authorized representative of a member

Typed or printed name of signee