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A. RIVERS
JUN 1 4 2023

COVER LETTER

TO:

TO:	Registration Sect Division of Corpo							
	ORFIBLUE (ORFIBLUE ORGANIC TEA CLUB LLC						
SUBJE	СТ:	T:Name of Limited Liability Company						
The enc	closed Articles of A	mendment and fee(s) are subm	itted for filing.					
Please 1	eturn all correspon	dence concerning this matter to	the following:					
		HERBERT FRAUWALLNE						
			Name of Person					
		ORFIBLUE ORGANIC TE	A CLUB LLC					
	Firm/Company							
-	3510 WALK IN WATER RD							
		Address						
		LAKE WALES FL 33898						
			City/State and Zip Code					
		ORFIBLUE@GMAILCOM	o be used for future annual report notif	fication)				
				,				
For fu	rther information c	oncerning this matter, please ca	dl:					
HERE	BERT FRAUWALI	LNER	863 978-7877 at ()					
	Name o	f Person	Area Code Daytim	e Telephone Number				
Enclo	sed is a check for t	he following amount:						
≡ \$	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
	Mailing Addre Registration	Section	Street Address: Registration So Division of Co					
	Division of O P.O. Box 63		The Centre of	Tallahassee				
	1.O. DOX 03		2415 N. Monro	ne Street, Suite 810				

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ORFIBLUE ORGANIC TEA CLUB LL	C		
(Name of the Limited Li (A F)	ability Company as it now appears on our records.) orida Limited Liability Company)		
The Articles of Organization for this Limited Liabili Florida document number L23000006212		and assigned	d
This amendment is submitted to amend the followin	ng:		
A. If amending name, enter the new name of the			
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."	1
Enter new principal offices address, if applicable			
(Principal office address MUST BE A STREET A			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>		
B. If amending the registered agent and/or regiagent and/or the new registered office address h	stered office address on our records, <u>enter the na</u> nere:	me of the new re	gistere
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address	25 O	<u>*u · </u>
	, 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
SEC	ALAN RICARDO VEGA	3510 WALK IN WATER RD LAKE WALES FL	3389 □ Add
			🖺 Remove
			🗆 Add
			□Remove
			□ Change
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			□Remove
			□Change
			□Add
			□ Remove
			Change
	 : ==		Remove
			Change

CEO HERBERT FRAUWALI	LNER OWNERSHIP PERCENTAGE TO CHANGE TO 50 PERCENT
<u>-</u>	
	(vinnal)
fective date, if other than the	
ote: If the date inserted in this becument's effective date on the C	block does not meet the applicable statutory titing requirements
cument's effective date on the t	repartment of State 5 records.
econd specifies a delayed effecti	ive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
A:1 21	2023
ated April 21	
	Signature of a symber or authorized representative of a member

Filing Fee: \$25.00