L23000058191

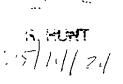
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600429322556

05/14/24--01005--004 *****30.00



COVER LETTER

TO:	Registratio Division of	n Section Corporations					
SUBJE		Maximus LLC					
SUBJEC	-1. <u></u>	Nan	ne of Limited Li	ability Company			
The encl	osed Article	s of Amendment and fee(s) are submitted	l for filing			
		espondence concerning thi		•			
		Aidan Rosen-McC	innis				
				Name of Person			
		Rebel Supplement	S				
	Firm/Company						
		3500 sw 19th ave	apt 125				
				Address			
		Gainesville, Florid	la, 32607				
			City	/State and Zip Code	<u>. </u>		- · : -
		rebelsupplementslic	~~	sed for future annual r	report notification	 : ,	7.3
For furth	er informati	on concerning this matter.		sed for rotate antiquir	героті поплеавон)		2:
Aidan R	osen-McGin	nis		314 803	-0407		
	Na	me of Person		_ at () Area Code	Daytime Teleph	none Number	
Enclosed	l is a check t	for the following amount:					
□ \$ 25.	00 Filing Fe	ee S \$30.00 Filing Fe Certificate of \$		\$55.00 Filing Fee & Certified Copy (additional copy is encl		\$60.00 Filing Certificate of Certified Cop (additional copy	Status &
	Division of P.O. Box	on Section of Corporations		Division The Cer 2415 N.	Idress: ation Section n of Corporati ntre of Tallaha . Monroe Stree ssee, FL 3230	assee et, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Salus Maximus LLC			
(Name of the Limited (A	Liability Company as it now appears on o Florida Limited Liability Company)	ur records.)	
The Articles of Organization for this Limited Liab	ility Company were filed on January	31 2023	_ and assigned
Florida document number L23000058191	 ·		
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company here:		
Rebei Labs LLC			
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designal	ion "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicabl	e:		
(Principal office address MUST BE A STREET A	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		• • • •
			. 7
B. If amending the registered agent and/or registered office address h	stered office address on our record <u>ere</u> :	s, <u>enter the name c</u>	of the new registere
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida str	eet 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

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
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
		_	□Remove

Page 2 of 3

		···			
					
		<u> </u>			
	***		- · · <u>- · · · · · · · · · · · · · · · ·</u>		
			· ·		·
		 ·			
ective date, if other than the date on effective date is listed, the date must be specte: If the date inserted in this block does cument's effective date on the Department.	ific and cannot be prior s not meet the applic	to date of filing able statutory	or more than 90 of filing requirem	_ (optional) days after filing.) ents, this date v	Pursuant to 605.020 vill not be listed a
record specifies a delayed effec he 90th day after the record is	tive date, but no filed.	ot an effecti	ve time, at 1	.2:01 a.m. c	on the earlier
ed May 6th	2024				
Aidan Rose	n-McGa	innis			
Signatu	re of a member of author	orized represent	ntive of a membe	ī -	

Page 3 of 3

Filing Fee: \$25.00