

L23000236947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

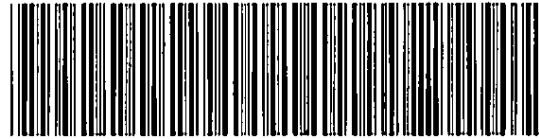
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100408626651

2023 MAY 19 AM 11:11



2023 MAY 19 AM 10:56

MAY 19 2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Lemongrass & Sage Wellness 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:

Elizabeth J Covington
Name of Person

Lemongrass & Sage Wellness LLC
Firm/Company

8550 Taughton Rd
Apt 1427, Jacksonville FL 32216
Address

City/State and Zip Code _____
 E-mail address: (to be used for future annual report notification) lemongrassandsage@outlook.com

For further information concerning this matter, please call:

Elizabeth J Covington at (904) 607-0017
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**

Lemongrass & Sage Wellness LLC

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

2023 MAY 19 AM 11:11

The Articles of Organization for this Limited Liability Company were filed on May 15, 2023 and assigned Florida document number L2300023697.

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)

8550 Touchton Rd

Apt 1427

Jacksonville FL 32216

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8550 Touchton Rd

Apt 1427

Jacksonville FL 32216

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:

Elizabeth J Covington

New Registered Office Address:

8550 Touchton Rd Apt 1427

Enter Florida street address

Jacksonville

City

Florida

32216

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.

Elizabeth J Covington
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 May 19th, 2023

Signature of a member of the

Signature of a member or authorized representative of a member

Elizabeth J Covington

Typed or printed name of signee