L23000 253965

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<u> </u>	Submiccion of Name Change 10/1/2024
· ‡ - ‡ -	Bionice Vacker Acupuncture LLC > Air Lemon LLC
	for any questions, Please contact Brooke Vackee (954) 261-4843
<u> </u>	Thank you
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. COVER LETTER

	Registration Se Division of Cor			
SUBJEC	Brooke Vac	cker Acupuncture LLC		
SUBJEC	- I • <u> </u>	Name of Lin	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Brooke Vacker		
			Name of Person	-
		Brooke Vacker Acupunctu	ire LLC	
			Fimt/Company	
		209 2nd Way		
			Address	
		West Palm Beach FL 3340)7	
			City/State and Zip Code	<u></u>
		brookekvacker@gmail.com	1	
		E-mail address: (to be used for future annual report not	ification)
For furth	er information o	oncerning this matter, please c	all:	
Brooke \	Vacker		954 261-4843	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
≣ \$25.0	00 Filing Fee	□ \$30,≎0 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 Addres Registration S	Section	Street Address: Registration Se	
	Division of C P.O. Box 632	•	Division of Co The Centre of	
	Tallahassee, I			be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears	on our records
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on $\frac{04/1}{2}$	35/2024 and assigned
Florida document number L23000253965	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company her	<u>re</u> :
ACU LEMON LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the de	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	0
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	911 CO
Mailing address MAY BE A POST OFFICE BOX)	5+
	-
B. If amending the registered agent and/or registered office address on our regent and/or the new registered office address here: Name of New Registered Agent:	cords, enter the name of the new regis
New Registered Office Address: Enter Flori	da street address
	Florida
City	Florida 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
			□ Add
			□Remove
		-	□Change
			□Add
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			□Change
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		<u> </u>	□Remove
			☐ Change

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Effective date, if other than the date of filing:			
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Note: If the 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed. Dated OCTOBER 1 2024 BROWNE JAMES B			
Note: If the 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed. Dated OCTOBER 1 2024 BROWNE JAMES B			
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The 90th day after the record is filed. Dated $\frac{\text{OCTOBER I}}{BRUKU / W}$	ne record specifies a delayed e	ffective date, but not an effective time,	at 12:01 a.m. on the earlier of
Brocke Halm			
Brocke Helm	OCTOBER 1	2024	
Signature of a member or authorized representative of a member	Dated	7	
Signature of a member or authorized representative of a member	B	TOURC HAIM	
	Si	nature of a member or authorized representative of a me	ember
		Typed or printed name of signee	

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Filing Fee: \$25.00