

L23 000 306 023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

(Business Entity Name)

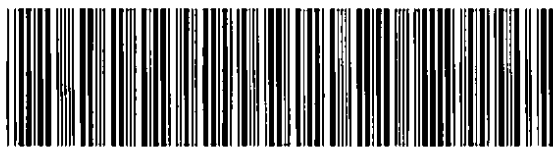
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07/06/23--01001--002 **55.00

2023 JUL -6 2023 JUL -5 PM 3:06

Authorization Letter to Submit Papers on My Behalf

Authorizer:

Mark Thomas

20940 Uptown Ave #420

Boca Raton Florida, 33428

markthomasinquiries@gmail.com

443-876-3540

7/5/23

Person submitting papers:

Gabriel Libow

23286 Alora Dr

Boca Raton, Florida 33433

To: Florida Division of Corporations

I, Mark Thomas, residing at 20940 Uptown Ave #420

Boca Raton Florida, 33428

hereby authorize Mr. Gabe Lebow, a trusted individual, to act on my behalf and submit papers to your organization. I am unable to submit the papers in person due to being out of town and urgency of need these files corrected.

Mr. Gabe Lebow is fully authorized to represent me and perform all necessary actions related to the submission of the papers. This includes, but is not limited to, completing any required forms, signing documents, providing additional information, and collecting any acknowledgments or receipts on my behalf.

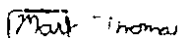
I understand that by granting this authorization, I am assuming full responsibility for the actions taken by Mr. Gabe Lebow in relation to the submission of these papers. Any and all decisions made or actions taken by him shall have the same effect as if they were made or taken by me personally.

Please do not hesitate to contact me at markthomasinquiries@gmail.com or 443-876-3540 if you require any additional information or clarification regarding this matter.

Thank you for your attention to this request. I appreciate your understanding and cooperation.

Yours sincerely,

Mark Thomas



COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Nutra Boost 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:

Mark Thomas

Name of Person

Nutra Boost LLC

Firm/Company

109 W Hillsboro Blvd

Address

Deerfield Beach Florida 33441

City/State and Zip Code

markthomasinquiries@gmail.com

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

For further information concerning this matter, please call:

Name of Person

at (_____) _____

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

Nutra Boost LLC

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

The Articles of Organization for this Limited Liability Company were filed on June 26, 2023 and assigned Florida document number L23000306023.

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:

109 W Hillsboro Blvd Deerfield Beach Florida 33441

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

109 W Hillsboro Blvd Deerfield Beach Florida 33441

(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:

Mark Christopher Thomas Jr

New Registered Office Address:

20940 Uptown Ave apt 420

Enter Florida street address

boca raton

Florida

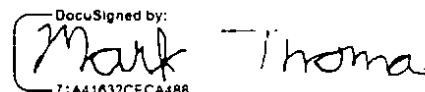
33428

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.

DocuSigned by:

7: A41632CECA488

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2023 JUN 15 10:05

E. Effective date, if other than the date of filing: 7/5/23 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 7/5/23

DocuSigned by:

DocuSigned by:
Mark Thomas
71A41A32CECA48B

Signature of a member or authorized representative of a member

Mark Thomas

Typed or printed name of signee

Filing Fee: \$25.00