## 123000441362

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## **COVER LETTER**

TO: Registration Section Division of Corpora	n tions			•"		
SUBJECT: lu	s Vitae Wellness I Name of Limit	nfusions LLC led Liability Company				
The enclosed Articles of Am Please return all corresponde		-				
		Jessica C. Fann	ing			
		Name of Person				
	Ius Vitae Wellness Infusions LLC					
		Firm/Company				
19046 Bruce B. Downs Blvd. # 1260						
	· <del>-</del> 1 -	Address				
	Tampa, FL 33647					
City/State and Zip Code						
iusvitaewellness@gmail.com  E-mail address: (to be used for future annual report notification)						
For further information conce					2024 FEB	
Jessica C	Fanning	<sub>at (</sub> 81 <sub>3</sub> 3	665 - 3805	(1)	g	
Name of Pe	rson	Area Code	Daytime Telephor	ne Number	PH 4: 27	. ,
Enclosed is a check for the fo	ollowing amount:			17°	, 10	
□\$25.00 Filing	Fee⊡\$30.00 Filing Fee & Certificate of Status	<ul> <li>\$55.00 Filing Fe Certified Copy (additional copy is e</li> </ul>		\$60.00 Filing For Certificate of St Certified Copy (additional copy is	atus &	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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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

## Ius Vitae Wellness Infusions 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 Liabili	ity Company were filed on	09/22/2023	and assigned
Florida document number <u>L23000441362</u>	<u>.                                    </u>		
This amendment is submitted to amend the following	ng:		
A.If amending name, e <u>nter the new name of the l</u>	imited liability company here	<u>2:</u>	
Ius Vitae Wellness LLC			
The new name must be distinguishable and contain the words	"Limited Liability Company," the desi	gnation "LLC" or the abbrev	riation "L.L.C."
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	X)		
			<u>ω 23</u>
B.If amending the registered agent and/or regist agent and/or the new registered office address h  Name of New Registered Agent:  New Registered Office Address:	<u>ere</u> :	cords, enter the name	e of the new registered
_	City	Zip C	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, <u>enter the title, name, and address of each person being added</u> <u>or removed from our records:</u>

MGR = Manager AMBR = Authorized Member Title Name Address Type of Action

		A . I . I
 		□Add
		¤Remove
		□Change
 		⊡Add
		¤Remove
		□Change
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		Remove The Change To
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D.If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E.Effective date, if other than the date of filing: (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. February 8th \_\_\_\_\_, 2024 . Dated Signature of a member or authorized representative of a member Jessica C. Fanning

Typed or printed name of signee