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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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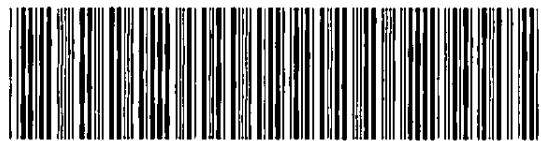
(Business Entity Name)

(Document Number)

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24/08/2024 14:54:49

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Botanical Teas Indian Rocks, I.L.C  
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:

Brian Henry

Name of Person

The Fog Group USA, LLC

Firm/Company

3115 South Ocean Blvd, Unit 1104,

Address

Highland Beach Florida 33487

City/State and Zip Code

brianhenry@mac.com

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

For further information concerning this matter, please call:

Brian Henry

Name of Person

at ( 212 )

Area Code

203-5669

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**

Botanical Teas Indian Rocks, 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 X 10/04/2023 and assigned  
Florida document number X L23000458453

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here: N/A

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: 3115 South Ocean Blvd. Unit 1104

(Principal office address MUST BE A STREET ADDRESS) Highland Beach Florida, 33487

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Botanical Teas Indian Rocks, LLC

3115 South Ocean Blvd, Unit 1104

Highland Beach Florida, 33487

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:

Brian Henry

New Registered Office Address:

3115 South Ocean Blvd, Unit 1104

Enter Florida street address

Highland Beach

Florida

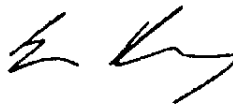
33487

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>	<u>Address</u>	<u>Type of Action</u>
<u>Managing Member</u>	<u>Brian Henry</u>	<u>3115 South Ocean Blvd Unit 1104</u> <u>Highland Beach Florida, 33487</u>	<input checked="" type="checkbox"/> Add
<u>Managing Member</u>	<u>Michael Luongo</u>	X <u>1269 W 1st merston RD</u> <sup>33774</sup> <u>Conroe FL</u>	<input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

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

Please remove my name (Micheal Luongo) and title from the Botanical Teas Indian Rocks, LLC after adding  
Brian Henry - the new Managing Member of the Botanical Teas Indian Rocks LLC. I have sold Transferred  
ownership of this LLC to Brian Henry - effective as soon as this document is processed. Thank you.

Signed: 

Michael Luongo

Managing Member

Botanical Teas Indian Rocks, LLC

E. Effective date, if other than the date of filing: August 12th 2024 (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 August 12th, 2024



Signature of a member or authorized representative of a member

Michael Luongo - Managing Member

Typed or printed name of signee