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FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

PLEASE USE FUNDS FROM THIS ACC AUTHORIZATION SIGNATURE:	OUNT: 120210000160: \$\frac{25}{25}.
Wellness and Cook LLC	124000344913
BUSINESS (Name)	Document #.
Walk in	Pick up time
Mail out	Will wait
Photocopy	
Certified Copy	•
Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication CORP LLLP	X_Amendment Resignation of R.A. Officer/Director Change of Registered Agent Dissociation or Resignation Merger Conversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign Filing Limited Partnership
Fictitious Name	Reinstatement Trademark
APOSTIL ()	STATEMENT OF AUTHORITY
Country	
	EXAMINER'S INITIALS:

COVER LETTER

Sign.com Document ID: 5157b9086d - Page 3/6

SUBJECT: WELLNESS	AND COOK LLC	ited Liability Company	
	Name of Enn	ned Liability Company	
The enclosed Articles of A	mendment and fec(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	SOLANGE GISELE BRIA		
		Name of Person	_
	WELLNESS AND COOK	LLC	
		Firm/Company	······································
	7901 4TH ST N, STE 300		
		Address	
	ST. PETERSBURG, FLO	RIDA, 33702	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report	notification)
For further information cor	ncerning this matter, please ca	all:	
		at ()	ytime Telephone Number
Name of I	Person	Area Code Da	ytime 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:		Street Addres	ו

TO:

Registration Section **Division of Corporations**

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 AMENDME. Sign.com Document ID: 5157b9086d - Page 4/6 TO ARTICLES OF ORGANIZATION OF

WELLNESS AND COOK LLC			
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number 1.24000344913	were filed on <u>08/06/2024</u>	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	5161 COLLINS AVE, APT 915		
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL, 33140		
Enter new mailing address, if applicable:	5161 COLLINS AVE, APT 915 Miami Beach FL 33140	-	
Mailing address MAY BE A POST OFFICE BOX)	Main Deach F1, 33140	<u></u>	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered ()ffice Address:	address on our records, enter the	name of the new registe	
	, Florid	la.	
	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, nan. Sign.com Document ID: 5157b9086d - Page 5/6 or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SANTANTONIO, DANIEL	5161 COLLINS AVE, APT 915	□Add
		MIAMI BEACH, FL 33140	■Remove
			□ Change
			□Add
			Remove
			□Change
			□Add
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WEBSITE, THE MEMBERS A	RE SOLANGE GISELE BRIA	AND DAMIAN MARIO I	OURAZZINI.
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ctive date, if other than the deflective date is listed, the date must be: If the date inserted in this block iment's effective date on the Department.	e specific and cannot be prior to dato k does not meet the applicable s	e of filing or more than 90 days	optional) after filing.) Pursuant to 605.0 , this date will not be listed
ord specifies a delayed effective of filed.	late, but not an effective time, a	t 12:01 a.m. on the earlier o	f: (b) The 90th day after t
SEPTEMBER 5	2024		
Solange E	Bria b69 Tre of a member or authorized		
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