112100004059

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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A SHIRLS

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 09/03/2021	_		
			WALK IN
ENTITY NAME GREEI	NLANE GREENS LLC	<u> </u>	
DOCUMENT NUMBER_			
	PLEASE FILE TH	E ATTACHED AND RETURN	
xxxxx	Plain Copy		
	Certified Copy		
	Certificate of Status		
**	PLEASE OBTAIN THE FL	DLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts	& Amendments	
	Certificate of Good Sta	nding	
	APOSTILLE' / N	OTARIAL CERTIFICATION	
COUNTRY OF DESTINAT	TION		
NUMBER OF CERTIFICA	TES REQUESTED		
TOTAL OWED \$25.00		ACCOUNT #: 1201600000	072
		5 8 FM	
Please call Tina at t	he above number kor	any issues or concerns. Thank you	so much!
	V	<i>v</i>	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Name of limited liability Company as it approximately	ppears on the records of the Floric	la Department of	
State: GREENLANE GREENS LLC			
Enter new principal office address, if applica	ble:		
(<u>Principal office address</u> MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limit	ted liability company is: M21000	004059	2021
3. Jurisdiction of its organization: DELAWA	\RE		
4. Date authorized to do business in Florida:			1 3 F
SECTION II (5-9 complete only the applic	cable changes)		SSE E
5. New name of the limited liability compan	y: GoGreenlane LLC (must contain "Limited Liability	Company, " "L.L.C	E STATE OF
(If name unavailable, enter alternate name ad copy of the written consent of the managers of must contain "Limited Liability Company,"	or managing members adopting th	ng business in Flori e alternate name. T	da and attach a he alternate name
 If amending the registered agent and/or registered agent and/or the new registered of 		ords, enter the name	of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Flo	orida Street Address	
		, Florida	
	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 the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
tle/ Capacity	<u>Name</u>	Address	Type of Action		
			□Add		
			□Remo		
			□Add		
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	·		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
aforementioned and	icate, if required: no more than 90 da endment(s), duly authoriteated by th he law of which this entity is organiz	official having custody of records in t	□Remo he		
	Signature of the	e authorized representative			

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "GREENLANE GREENS

LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

"GOGREENLANE LLC" ON THE SECOND DAY OF SEPTEMBER, A.D. 2021, AT

10:04 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GOGREENLANE LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF FEBRUARY, A.D. 2021.



Authentication: 204082429

Date: 09-03-21