



# ARTICLES OF AMENDMENT TO FILED/EFFECTIVE ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

DEC 16 AM 9:40

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Namasta Foods, L.L.C.

2. The date the articles of organization were filed was:

February 17, 2000

## COMPLETE ONLY THE APPLICABLE ITEMS

3. The name of the limited liability company is amended to read:

Namaste Foods, L.L.C.

\*\*new address: P.O. Box 3133, Coeur d'Alene, Idaho 83816

4. The latest date certain upon which the limited liability company will dissolve is amended to read:

5. The management of the limited liability company shall henceforth be vested in:

☐ Manager(s) ☐ Members

6. The information on the managers/members shall be amended as follows:

Name	Address	Add	Delete	Other
Laurie D. Regan	P.O. Box 2695, Hayden, ID 83835	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Daphne Taylor	P.O. Box 3133	<input type="checkbox"/>	<input type="checkbox"/>	Address Change
	Coeur d'Alene, Idaho 83816	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

7. Signature of at least one manager, if any, or at least one member.

Signature: Daphne Taylor

Typed Name: Daphne Taylor

Capacity: Member

Signature: \_\_\_\_\_

Typed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

Secretary of State use only

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Revised 08/2002

Web Form

IDAHO SECRETARY OF STATE  
12/16/2002 05:00  
CK: 4231 CT: 87354 BH: 651476  
1 @ 30.00 = 30.00 ORGAN AMEN # 2

W11114



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<u>Daphne Taylor</u>	<u>P.O. Box 3133</u>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Address Change</u>
_____	<u>Coeur d'Alene, Idaho 83816</u>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

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Signature: Daphne Taylor

Typed Name: Daphne Taylor

Capacity: Member

Signature: \_\_\_\_\_

Typed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

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