

L21000340984

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2021 OCT 22 PM 12:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LLC  
Amend

NOV 18 2021

D CONNELL



2021 OCT 22 AM 8:06

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 6, 2021

CHRISTOPHER T GAY  
2806 LEWIS RD  
DOVER, FL 33527

SUBJECT: 3CAGUYS, LLC  
Ref. Number: L21000340984

We have received your document . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SASHA B PENNYWELL  
Regulatory Specialist II

Letter Number: 321A00023986

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

3CAGUYS, 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 July 28, 2021 and assigned Florida document number L21000340984.

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: \_\_\_\_\_

(Principal office address MUST BE A STREET ADDRESS)

N/A

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address MAY BE A POST OFFICE BOX)

N/A

SECRETARY OF STATE  
FALL ANNUAL ASSESSMENT FLORIDA  
2021 OCT 22 PM 12:00  
FILED

**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: \_\_\_\_\_

N/A

New Registered Office Address: \_\_\_\_\_

N/A

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_

City

Zip Code

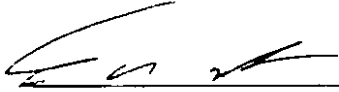
**New Registered Agent's Signature, if changing Registered Agent:**

*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 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>
MGR	T. Martin Consulting, LLC	1309 Estatewood Dr	<input type="checkbox"/> Add
		Brandon, FL 33510	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Jean Carlos Degrot	7918 Kosi Palm PL	<input type="checkbox"/> Add
		Tampa, FL 33615	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	4C Consulting, LLC	2806 Lewis Rd	<input type="checkbox"/> Add
		Dover, FL 33527	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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