103000044/19

(Requestor's Name)
(
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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09/30/19--01002--021 **25.00



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Crawford Company, I	LLC			
-				
].		
·				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
			<u> </u>	Trade/Service Mark
				Merger File
				Art, of Amend, File
		}		RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
		:	***	Photo Copy
				Certificate of Good Standing
				Certificate of Status
•				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
				Vehicle Search
		- 		Driving Record
Requested by: Seth	09/30/19			UCC 1 or 3 File
Name	Date Tin	ne		UCC 11 Search
				UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

TO: Registration S Division of Co			
Crawford Crawford	Company LLC		
Wilder .	Name of Lin	nted Liability Company	
	Amendment and fec(s) are sub ondence concerning this matter	-	
	Michael S Charmer		
		Name of Person	
	Crawford Company LLC		
		Firm/Company	-,,
	P.O. Box 227, Clinch's Ho	use, Lord Street	
		Address	
	Douglas, Isle of Man, IM9	9 IRZ	
		City/State and Zip Code	
	If@middletonkatz.com	to be used for future annual report notific	****
For further information of	concerning this matter, please ca	·	cation)
Michael Charmer		44 1624648500	
Name o	f Person	44 1624648500 at ()	Telephone Number
Enclosed is a check for the	ne 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(Name of the Limited Limbility Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company lorida document number $\frac{L03000044119}{L03000044119}$.	were filed on 11/13/2003 and assigned		
his amendment is submitted to amend the following:			
If amending name, enter the new name of the limited liab	ility company here:		
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
nter new principal offices address, if applicable:	Clinch's House		
Principal office address MUST BE A STREET ADDRESS)	Lord Street, Douglas		
	Isle of Man, IM99 1RZ, British Isles		
inter new mailing address, if applicable:	Clinch's House		
Mailing address MAY BE A POST OFFICE BOX)	Lord Street, Douglas		
TRAINING MANUES MAN DE ATOST OTTICE BOAY	Isle of Man, IM99 TRZ, British Isles		
s. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her Name of New Registered Agent:			
Name of New Registered Agent:			
egistered agent and/or the new registered office address her			
egistered agent and/or the new registered office address her Name of New Registered Agent:	<u>e</u> :		

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>	Address	Type of Action
MGR	Martin John Stewart Katz	11 Hope Street, Douglas	
		Isle of Man, IMI IAQ, BI	≅ Remove
			Change
MGR	Michael Stewart Charmer	P.O. Box 227, Clinch's House	≅ ∧dd
		Lord Street, Douglas	□ Remove
		Isle of Man, IM99 1RZ, BI	Change
	\$ 175.000 p.s.		BAdd 9
			Remove 3
			Change P
			GAdd 9 SEP 30 PH 7: 10
			☐ Remove
			☐ Change
			☐ Remove
			□ Change
			Add
			Remove
			Change

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Mo2	September 30th	2019			
Signature of a member or authorized representative of a member		Mo/	 ,		
		Signature of a member or au	thorized representative of	i member	

Page 3 of 3

Filing Fee: \$25.00