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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Advanced Defensive Concepts, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marc Pezzella

Name of Person

Advanced Defensive Concepts, LLC

Firm/Company

4926 Camus St.

Address

Sarasota, FL 34232

City/State and Zip Code

marcpezzella@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marc Pezzella

{**/}941\374-5639

Name of Person

Area Code & Daytime 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:

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

Advanced Defensive Co (Name of the Limited (A		ny as it now appears on our reciability Company)	cords.)
The Articles of Organization for this Limited Life Florida document number 208354907			and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
The new name must be distinguishable and end wit "L.L.C."	th the words "Limi	ted Liability Company," the des	ignation "LLC" or the abbreviation
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		F 2 65
			F F T
Enter new mailing address, if applicable:		4926 Camus St.	2
(Mailing address MAY BE A POST OFFICE BOX)		Sarasota, FL 34232	
			63
B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent:		<u>e</u> :	s, <u>enter the name of the new</u>
	4926 Cam	nus St	
New Registered Office Address:			street address
	Sarasota	<u>.</u> F	Torida 34232
	,	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 608, 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

Page 1 of 3

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Mar MGRM = M	nager Ianaging Member		,
<u>Title</u>	Name	Address	Type of Action
MGRM	Tom Dusseau	15031 SKIP JACK LOC	PAdd
		Bradenton, Fl 34202	Remove
			Remove
			Add
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November 13	2013			•
Oh to h				
Signatu	re of a member or authorized representative of a member			···
Marc Pezzella				
	Typed or printed name of signee			
	Page 3 of 3			
	Filing Fee: \$25.00			
nature: Hase Pessella. Marc Pezzella (Nov 13, 2013)		, m. (>	20 N C N C N C N C N C N C N C N C N C N	
Email: pezzellax2@yahoo.com			<u> </u>	
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