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SECRETARY OF STATE
TALLAHASSEE, FL

US
10/11/21

COVER LETTER

**TO: Registration Section/
Division of Corporations**

SUBJECT: Boldist, 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:

Daniel D. Whitehouse, Esq.

Name of Person

Whitehouse & Cooper, PLLC

Firm/Company

201 E. Pine Street, Suite 205

Address

Orlando, FL 32801

City/State and Zip Code

dwhitehouse@whitehouse-cooper.com

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

SECRETARY OF STATE
TALLAHASSEE, FL

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For further information concerning this matter, please call:

Daniel D. Whitehouse, Esq.

321 285-2300

at (_____) _____

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

LAUGHING SAMURAI, 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 11/06/2008 and assigned
Florida document number L08000104152.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Boldist, LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

WHITEHOUSE & COOPER, PLLC

New Registered Office Address:

201 E. Pine Street, Suite 205

Enter Florida street address

Orlando

City

Florida 32801

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.

DocuSigned by:

Daniel Whitehouse

45C495B770324AD

If Changing Registered Agent, Signature of New Registered Agent

In 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	COLLINS, BENJAMIN	900 Orange Ave	<input type="checkbox"/> Add
		Winter Park, FL 32789	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	GOMEZ, GILBERTO	900 Orange Ave	<input type="checkbox"/> Add
		Winter Park, FL 32789	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FL

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

9/28/2021

Dated _____, _____.

DocuSigned by:

Benjamin Collins

BOE9134358EB435

Signature of a member or authorized representative of a member

BENJAMIN COLLINS

Typed or printed name of signee