109000027903

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COVER LETTER

CUDIECT.	Small & Biz	Company, LLC					
SUBJECT:		Name of Lim	ited Liability Company				
The enclosed	l Articles of A	mendment and fee(s) are sub	mitted for filing.				
Please return	all correspond	dence concerning this matter	to the following:				
		Olivier Petit					
			Name of Person				
		2	Firm/Company				
		1680 Barton St					
		Longwood, FL 32750	Address				
		office@daytonazipline.com	City/State and Zip Code		-	~	
For further in	iformation con	E-mail address: (to be used for future annual report notificat all:	ion)	TATE AREAS	2018 DEC 17	===
Olivier Petit			386 882-8016		(5) } E(1) (1)		
Enclosed is a	Name of F	Person following amount:		lephone Number		PM 2: 31	
\$25.00 F	iling Fec	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filin Certificate Certified C (additional co	of Status Copy		

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

Small & Biz Company, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Clorida document number <u>L09000027903</u> .	were filed on March 23, 2009	and assigned
his amendment is submitted to amend the following:		
a. 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	ity Company," the designation "LLC" or t	he abbreviation "L.L.C."
inter new principal offices address, if applicable:	7	201
Principal office address MUST BE A STREET ADDRESS)		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		β
	·	
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here		ter the name of the
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	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>	Address	Type of Action
MGRM	Petit, Olivier	1680 Barton St	
			
		Longwood, FL 32750	_
			■ Remove
			Change
Other	Treetop Trekking Operations LLC	7385 Papineau	
————			Add
		Montreal, QC H2E 2-G7 CA	
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ctive date, if other than the d	ate of filing:	(option	al)
effective date is listed, the date must be: If the date inserted in this bloc	e specific and cannot be prior to date of filing k does not meet the applicable statutory	or more than 90 days after fil filing requirements, this d	ing.) Pursuant to 605.03 ate will not be listed
ument's effective date on the Dep	artment of State's records.		
record energifies a data	effective date to be a consequence of		
record specifies a delayed one 90th day after the recor	effective date, but not an effective dis filed.	ve time, at 12:01 a.r	n. on the earlier
December 13	. 2018		
•			
		<u> </u>	
<u> </u>	gnature of a member or authorized representa	ative of a member	

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Filing Fee: \$25.00