## L090000041494

(Re	questor's Name)	
- (Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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2016 HAY 31 PH 5: 43
SECRETARY OF STATE
SECRETARY OF STATE

May

## **COVER LETTER**

Div	ision of Cor	porations						
SUBJECT:	FIERCE GU	JPPY, LLC						
		Name of Lim	ited Liability Company					
-								
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return	all correspo	ndence concerning this matter	to the following:					
		Danielle C. Marczak						
			Name of Person	<del>-</del>				
		George P. Langford						
		•-	Firm/Company					
		3357 Tamiami Trail North						
			Address					
		Naples, FL 34103						
	City/State and Zip Code							
		jwm63@icloud.com						
			to be used for future annual report no	otification)				
For further in	nformation co	oncerning this matter, please ca	all:					
Danielle C. I	Marczak		239 262-2011 at ( )					
	Name of	Person		me Telephone Number				
Enclosed is a	a check for th	e following amount:						
<b>≘</b> \$25.00 F	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** 

TO:

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**

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ORGANIZATION
OF
ORGANIZATION OF  Sany as it now appears on our records.  Liability Company)  y were filed on April 29, 2009  and assigned.
y were filed on April 29, 2009 and assigned.
y were filed on and assigned.
7
bility company here:
oility Company," the designation "LLC" or the abbreviation "L.L.C."
44 Manor Drive
Basking Ridge, NJ 07920
office address on our records, enter the name of the new re:
Enter Florida street address
Elovido
, Florida City Zip Code
<u>:</u>
ree to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is e address, I hereby confirm that the limited liability

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	JOHN MELNYK	44 Manor Drive, Basking Ridge, N.	<b>≅</b> Add
			Remove
			☐ Change
MGR	DOMENIC COSTANTINI	3361 Tamiami Tr. N., Naples, FL 3	□ Add
			■ Remove
			Change
			Add
			Remove
		-	Change
			HAD 3
			Remove Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change

Effective date, if other than the date of filing:	,										
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Page 3 of 3

Filing Fee: \$25.00