Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H15000131108 3)))



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Fax Number : (850) 617-6383

From:

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: (561)801-7312

Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TACK3, LLC

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No. 1579 P. 4

HISW01311083

COVER LETTER

	ation Section n of Corporations	
	ACK3, LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Ar	ticles of Amendment and fee(s) are submitted for filing.	
Please return all	correspondence concerning this matter to the following:	
	David Frisbie	
	Name of Person	SECRETALLY H
	Firm/Company	HASSE
	439 Worth Avenue	E B
	Address	MI.I.
	Palm Beach, FL 33480	
d .	City/State and Zip Code	
	dave.frishie@gmail.com	
For further inform	E-mail address: (to be used for future annual report notification) mation concerning this matter, please call:	
David Prisbia	\$61 818-0030 at ()	
	Name of Person Area Code Daysime Telephone Number	_
Enclosed is a che	sck for the following amount:	
■ \$25.00 Filing	g Fee S30,00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Certificate of Status Certified Copy Certificate of (additional copy is enclosed) Certified Copy (additional copy	S u nus & Ly
	MAN ING ANDRESS. STORET/COMPRESSION	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassoe, FL 32314 STREET/COURIER ADDRESS
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallshastor, FL 32301

No. 1579 P. 2



June 1, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

TACK3, LLC 501 S FLAGLER DR, STE. 201 WEST PALM BEACE, FL 33401US

SUBJECT: TACK3, LLC REF: L09000057426

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ARANDONED".

I apologize for the time frame but we had a fax machine go down on us and when it was fixed your filing printed out.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator FAX Aud. #: R15000112651 Letter Number: 315A00011446

PECEIVED
15 JUII -2 AM 9: 45
SEGETARY OF STATE
ALLAHASSEE FIGATE

4,5000 1311087

No. 1579 "

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TACKS, LLC			·	47.5
(Name of the Liv	(A Pleyids Limited	ng sa it now appear Lability Company)	on our records.)	200
The Articles of Organization for this Limited	Liability Company	were filed on N	NE 12, 2009	and assigned
Florida document number L09000037426				_
This amendment is submitted to smend the fo	lowing			
A. If amending name, enter the new name	of the limited lish	ility company he	Œ:	
The new same must be distinguishable and contain the	words "Limited Lishi	lity Company," the de	eignetian TLC" or the ab	previation T.L.C."
Enter new principal offices address, if appl	cable:	439 WORTH A	VENUE	<u></u>
Principal office address MUST BE A STRE	PALM BEACH	FL 33480		
Enter new mailing address, if applicable:	439 WORTH A	VENUE		
Mailing address MAY BE A POST OFFICE	PAIM BEACH	FL 33480	-	
B. If amending the registered agent and registered agent and/or the new registered	Mee address her	<u>e</u> :	our records, enter	the name of the 1
Name of New Registered Acont	DAVID FRISB	TB		
New Registered Office Address:	459 WORTH A		da armet address	
	PALM BRACE	• •		• on
	A CAPPIN DISPINA	- City	Florida 334	Zip Code
Yew Registered Agent's Signature, if changing	Registered Agency	-		color and a

I hereby accept the appointment as registered agent and agree to out 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

Page 1 of 3

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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> Yitle</u>	Name	Aridress	Type of Action
MGR	DAVID FRISBIE	439 WORTH AVENUE	■ Add
		PALM BEACH, FL 33480	□ Remoye
			□ Change
MGR	PAUL A KRASKER	501 S FLAGUER DRIVE	
	•	WEST PALM BEACH, FL 33401	■ Remove
			□ Change
MGR	ARTHUR READE	6 YOUNG'S WAY	□ Add
		NANTUCKET, MA 02554	Remove
		,	Change
			D Add
			D Remove
			C) Change
_			[] Add
	•		C Remove
			D Change
			D Add
			D Remove
			Change

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D. If a	mending any other info	rmation, enter change(s) here: (Attach additional sheets, if nece	essary.)	
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				<u> </u>
			******************	·
				
				
				_
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			······································	*****
E. Effe	ctive date, if other than	the date of filing: (option to date of filing or more than 90 days after	onal)	
Not	e: If the date inserted in th	must be specific and connot be prior to date of filing or more than 90 days after is block doze not meet the applicable statutory filing requirements, this to Department of State's records.	filing.) Pursuant to date will not be	605.0207 (3)(b) listed as the
If the r (b) Th	record specifies a dela ne 90th day after the	ryed effective date, but not an effective time, at 12:01 a record is filed.	.m. on the ea	riler of:
Date	May 8	n	SECRET	15 JUN-
		Signature of a member or authorized representative of a member	783 873 775)	2
	Paul	CYG 5 kg		

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Filing Fee: \$25.00