110000 54062

	questor's Name)	
(Ad	dress)	
hA)	dress)	
(urees,	
(Cit	y/State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Dc	cument Number)	
Certified Copies	_ Certificates	of Status
······································		
Special Instructions to	Filing Officer:	
]
	Office Use Onl	v



10/08/18--01018--001 **30.00





COVER LETTER

TO: Registration Section Division of Corporations

- IRONS ENTERPRISES LLC

SUBJECT: ____

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:

EDWARD B. IRONS

Name of Person

IRONS ENTERPRISES LLC

Firm/Company

14312 EVELYN DRIVE

Address

PALM BEACH GARDENS, FL 33410

City/State and Zip Code EDIRONS1922/a/GMAIL.COM

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

For further information concerning this matter, please call:

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 Statos & 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

:			~	
•	•	•d	*****	1 .,

	2119 OCT - S AH	9: 3
IRONS ENTERPRISES LLC		
(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)	<u> </u>	•
The Articles of Organization for this Limited Liability Company were filed on05/06/2011 Florida document number1.11000054062	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
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 <u>A STREET ADDRESS)</u>		
Enter new mailing address, if applicable:		
B. If amending the registered agent and/or registered office address on our records, <u>entered agent and/or the new registered office address here</u> :	<u>r the name of the ne</u>	<u>w</u>
Name of New Registered Agent:		
New Registered Office Address:		
Enter Florida street address		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

.

.

•

.

<u>Title</u>	Name	Address	Type of Action
MGR	MICAH E. IRONS	3212 FLORIDA BLVD.	🗖 Add
		PALM BEACH GARDENS	
		Fi., 33410	
			🛛 Add
			□ Remove
			Change
			🗆 Add
			C Remove
			C Change
			Add
		<u> </u>	Remove
			Change
			🖸 Add
			Remove
			Change
<u> </u>		- <u></u>	Add
			Remove
			Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)* MR. MICAH E. IRONS WAS ENTERED AS A NEW MANAGING PARTNER OF THE LIMITED LIABILITY

.

.

)19.			
 . <u> </u>		~ ~ _	
 <u></u>			
 <u> </u>		_ _	
 			•
 	<u> </u>		
 			<u></u>

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	OCTOBER 03		
	Edward B	tions	

Signature of a member or authorized representative of a member-

EDWARD B. IRONS

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00