

L11000104149

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2013 JUL 22 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Gulligan JUL 23 2013

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Kicks Authority 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:

**Brandon Edmonds**

Name of Person

**Kicks Authority LLC**

Firm/Company

**6084 Strawberry Lakes Circle**

Address

**Lake Worth, FL 33463**

City/State and Zip Code

**brandon@kicksauthority.com**

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

For further information concerning this matter, please call:

**Brandon Edmonds**

Name of Person

at ( **561** ) **281-5034**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED

2013 JUL 22 PM 2:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Kicks Authority 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 09/12/2011 and assigned  
Florida document number L11000104149.

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 end with 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)

2421 Jackson Bluff RD.

Unit 834

Tallahassee, FL 32304

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

242 Jackson Bluff RD.

Unit 834

Tallahassee, FL 32304

**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:

Brandon Edmonds

New Registered Office Address:

242 Jackson Bluff RD. Unit 834

*Enter Florida street address*

Tallahassee

*City*

, Florida 32304

*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 608, 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.*

Brandon Edmonds

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Marc J Nixon Normil	730 Malibu Bay Drive	<input type="checkbox"/> Add
		Unit 204	<input checked="" type="checkbox"/> Remove
		West Palm Beach, FL 33401	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

Remove Marc J Nixon Normil from all held positions within Kicks Authority LLC.

Appoint Brandon Edmonds as "Operating Manager" of Kicks Authority LLC.

Appoint Treyveckio Clark as "Secretary" of Kicks Authority LLC.

Appoint Tony Edouard as "Treasurer" of Kicks Authority LLC.

Dated **July 18th**, **2013**



Signature of a member or authorized representative of a member

**Brandon Edmonds**

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

**FILED**  
**2013 JUL 22 PM 2:00**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**