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2013 SEP 25 AN II: 06 SECRETARY OF STATE TALL ANASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Section

Division of Corporations	
SUBJECT: ReinHoll Name of Limited Liability Company	
Twine of Emilion External Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Robert Sins Name of Person	
Name of Person	
RÉR Paintbell LLC Firm/Company	
Firm/Company	
4863 East Riverside Drive	
Address	
Fort Myers PL 33905  City/State and Zip Code  Sims & Fort Myers Paintbell. com  E-mail address: (to be used for future annual report notification)	
City/State and Zip Code	
and P. Fort Myare Paintball. com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Robert Sins at (954) 534 ' (477)  Name of Person Area Code & Daytime Telephone Number	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee U\$30.00 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	osed)
MAILING ADDRESS: STREET/COURIER ADDRESS:	
Registration Section Registration Section	
Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED 2013 SEP 25 AM II: 06

SECRETARY OF STATE TALLAHASSEE, FLORIDA

R+R Paintball LLC

(Name of the Limited ) (A	Liability Compan Florida Limited Li	<mark>y as it now appears оп ош</mark> ability Company)	records.)	
The Articles of Organization for this Limited Liz Florida document number <u>LICOOI3</u>	ability Company v 5 149	were filed on <u>[(- O) -</u>	U	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabil	ity company here:		
The new name must be distinguishable and end with "L.L.C."	the words "Limite	ed Liability Company," the	designation '	'LLC" or the abbreviation
Enter new principal offices address, if applica	ıble:			
(Principal office address MUST BE A STREET	(ADDRESS)		riddinger tellimber versebelene	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u>30X)</u>	4863 East Fort Mycrs	Riversia PL 3	de Drive 13905
B. If amending the registered agent and/o registered agent and/or the new registered off	<u>lce address bere</u>	:		
Name of New Registered Agent:	Robert	Sins		
New Registered Office Address:	4863	East Riverside	Drice	
	Robert Sins 4863 East Riverside Drive Emer Florida street address			
	Fort My	reis City	. Florida _	33905
		City		Zip Code
New Registered Agent's Signature, if changing R	egistered Agent:			
I hereby accept the appointment as registered				gree 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.

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>	Address	Type of Action
MGRM	Robert Gale	1101 Olive Avenue South lehigh Acres, FL 33976	Add Remove
			Add
			Add Remove
			Add
			Add Remove
	<del></del>		Add

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated	September 24th Del3.
	Signature of a member or authorized representative of a member
	Rebert Sins
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

