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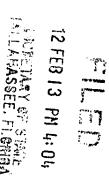
EXAMINER



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## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: Critical Moments Defensive Handguns & Accessories L.L.C.

Name of Limited Liability Company

The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.				
Please return all correspon	dence concerning this matter	to the following:				
		Joseph D Lowe Jr.				
	Critical Moments Defensive Handguns & Accessories L.L.C.					
	3957 Forsyth Rd Suite A-2					
		Address				
Winter Park FL 32792						
	spee	City/State and Zip Code dgunner45@yahoo.cor	n			
		to be used for future annual report				
For further information co	ncerning this matter, please c	all:				
	h D Lowe Jr.	at (_407_)	437-6753			
Name of	Person	Area Code & Da	sytime Telephone Number			
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 encl	S60.00 Filing Fee, Certificate of Sta Osed) Certified Copy (additional copy			

**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

Critical Moments Defensive Handguns & Accessories LLC

(A Flo	rida Limited L	lability Company)	on our records.)			
The Articles of Organization for this Limited Liabin Florida document number <u>L1100013904</u>		were filed on	12/12/2011	and a	ssigne	d
This amendment is submitted to amend the following	ng:					
A. If amending name, enter the new name of the	<u>e limited liab</u> i	lity company here:	3			
The new name must be distinguishable and end with the "L.L.C."	ie words "Limi	ed Liability Compan	y," the designation "	'LLC" or the	e abbre	vintion
Enter new principal offices address, if applicable	e:	3957 Forsyth F	₹d			
(Principal office address MUST BE A STREET A	(DDRESS)	Suite A-2		1 27	7	
		Winter park FL	32792	Sans.	8	
· ·				923e	သ	To year a
Enter new mailing address, if applicable:				in the	70	is !!*!!
(Mailing address MAY BE A POST OFFICE BOX)				75		
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			1	15-	<del>-</del> -	
B. If amending the registered agent and/or registered agent and/or the new registered office			r records, <u>enter</u>	the name	of the	e new
Name of New Registered Agent:	Joseph D Lowe Jr.					
New Registered Office Address:	3957 Forsyt	h Rd Suite A-2				
	Enter Florida street address					
	Winter park		. Florida	ida 32792		
~	City			Zip Co	de	

## 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.

MGR ≈ Manager

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:

MGRM = Managing Member **Title** Name <u>Address</u> Type of Action MGR Joseph D Lowe Jr. 1123 Denton Rd Z Add Winter Park FL 32792 Remove William W Mallory MGR 2522 Alexa CT Remove Winter park FL 32792 □ Add Remove ☐ Remove ∭Add Remove ∏∧dd Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Joseph D Lowe Jr. Typed or printed name of signes

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Filing Fee: \$25.00