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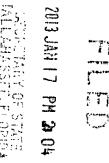
(Requestor's Name)
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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Ff the Hook Name of Limit	Fish Jerky LLC ed Liability Company	<u></u>
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
		Name of Person.	
	0H the	Hook Fish Jeery Firm/Company	LLC
	1355 A.	apaho Ave Address	2013 J
		St. Augustine Fl he 900 yahoo. Com o be used for future annual report notificati	32084 SSE T
	G Doot	he 900 yahoo. Com	ion)
For further information co	ncerning this matter, please co	all:	
GARY B	soothe	at (904) 371-08 Area Code & Daytime Te	₹ \$ 6
Name of	Person	Area Code & Daytime Te	elephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	S\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & 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

ARTICLES (OF ORGANIZATIO	V 2013
	OF	
OFF the Hook (Name of the Limited Liability Co. (A Florida Lin	Company as it now appears of mited Liability Company)	LLC 000 I
,	y	
The Articles of Organization for this Limited Liability Cor	mpany were filed on	and assigned
Florida document number		tem.
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company,"	'the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1355 ARA	PAHO AUC
(Principal office address MUST BE A STREET ADDRE	St. Augus	tine F1 32084
Enter new mailing address, if applicable:	1355 Ara	paho Ave
(Mailing address MAY BE A POST OFFICE BOX)	St. August	paho Ave ne, Fl 32084
B. If amending the registered agent and/or registered agent and/or the new registered office addre		records, enter the name of the new
Name of New Registered Agent:		<u>, , , , , , , , , , , , , , , , , , , </u>
New Registered Office Address:	Enter	Florida street address
		, Florida
	Citv	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.

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 CEO	Thomas Morgan	1355 Leapaho Auc	Add
CED		Stagustne F1 32084	Remove
NGRH CFO	Grapy Boothe	1355 ARABANO AUC St Augustine Fl 32084	Add Remove.
NGRM COO	Douglas Scott	1355 Arapaho Au 84 Augustine Fl 32084	Add Remove
			Add Amove T
			Add
			Remove
			Add
			Kemove

		
		
	<u> </u>	
Las M. Fosta		
(/)	member or authorized representative of a member $300 + 400$	
	Typed or printed name of signee	- T. 2
	Page 3 of 3	
	Filing Fee: \$25.00	2013 JAN 17 350.11740 311.4117.88