12000077261

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SECRETARY OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: All About Bounce

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:

Ryan Anthony

Name of Person

All About Bounce

Firm/Company

8185 82nd Ave.

Address

Seminole, FL, 33777

City/State and Zip Code

allaboutbounce@gmail.com

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

For further information concerning this matter, please call:

Ryan Anthony

Name of Person

727, 329-6480

Area Code & Daytime 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 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 OF

FILED
2013 MAY 23 PM 12: 42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

All About Bounce; LU				
(Name of the Limited	l Liability Compa: A Florida Limited L	ny as it now appears on our records.) iability Company)		
The Articles of Organization for this Limited I. Florida document number L12000077261	iability Company	were filed on June 11th, 2012	and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:		
N/A				
The new name must be distinguishable and end w "L.L.C."	ith the words "Limi	ted Liability Company," the designation "	LLC" or the abbreviation	
Enter new principal offices address, if applicable:		N/A		
(Principal office address MUST BE A STREA	ET ADDRESS)			
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	BOX)			
		4-4		
B. If amending the registered agent and registered agent and/or the new registered of			the name of the new	
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Enter Florida street address		
		, Florida		
		City	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 **Type of Action Title** <u>Name</u> **Address** 6533 Woodland Blvd Dean Hill **MGRM** Pinellas Park, FL, 33781 Remove Remove

• •	ership. Dean Hill is leaving the company.
Ownership of the	e company should transfer to Ryan Anthony
to 100%.	
Dated April 26th	2013
	gnature of a member or authorized representative of a member
Dean Hill	·
	Typed or printed name of signee

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Filing Fee: \$25.00

