112000092288

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
, , , , , ,					
(Document Number)					
(Boodinell Hulliber)					
Certified Copies Certificates of Status					
Certified Copies Certificates of Status					

Special Instructions to Filing Officer:

A. LUNT

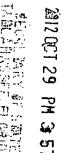
OCT 31 2012

EXAMINER

Office Use Only



400241173154



Constitution of the state of th

10/29/12--01021--010 **25.00

COVER LETTER

Registration Section

TO:

Division of Cor	porations			
SUBJECT:	Tons o	f Ammo, LLC		
30B0001				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Jeffrey L. Efird		
		Name of Person		
	Tons of Ammo, LLC			
		Firm/Company		
	5	5921 NE 14th Terrace		
		Address	A REST	
	For	Lauderdale, FL 33334	25 25 E	
	City/State and Zip Code			
	E-mail address: (efird@mbafcpa.com to be used for future annual report notification	مخالبه کی ایک در	
For further information	concerning this matter, please of	eall:		
	sa J.D. Efird	a. (0 Ext. 1297	
Name (of Person	Area Code & Daytime Tel	ephone Number	
Enclosed is a check for t	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)	
Regist	LING ADDRESS: tration Section on of Corporations	STREET/COURIER Registration Section Division of Corporatio		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center	Circle	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tons of A	<u>Ammo, LLC </u>			
(Name of the Limited Liability Com (A Florida Limite	pany as it now appead Liability Company)	irs on our records.)		
· ·	• • • • • • • • • • • • • • • • • • • •			
The Articles of Organization for this Limited Liability Compa	ny were filed on	July 17, 2012	and as:	signed
Florida document numberL12000092288				
This amendment is submitted to amend the following:				
This amendment is submitted to amend the following.				
A. If amending name, enter the new name of the limited li	<u>iability company he</u>	<u>re</u> :		
The new name must be distinguishable and end with the words "L.L.C."	imited Liability Comp	oany," the designation "	LLC" or the	abbreviation
Enter new principal offices address, if applicable:				1
• • •	<u></u>			
(Principal office address MUST BE A STREET ADDRESS)		-	- TO	777
			TO DE	
			୍ର କ୍ରିଲ କ ୍ର	
Enter new mailing address, if applicable:	<u>_ : </u>		<u></u>	
(Mailing address MAY BE A POST OFFICE BOX)		**************************************		
B. If amending the registered agent and/or registered		our records, enter	the name	of the new
registered agent and/or the new registered office address l	<u>iere</u> :			
Name of New Registered Agent:				
New Registered Office Address:				
	E	nter Florida street ad	dress	
		, Florida		
	City		Zip Cod	le

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 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	Lisa Josephine D Efird	5921 NE 14th Terrace Fort Lauderdale, FL 33334	Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if necessa	20 18 F
		ſ	129 PH 3:
Dated	1/25/2012		/
	Signature of a mem	per or authorized representative of a member	
	Typ	Jeffrey L. Efird ed or printed name of signee	<u> </u>

Page 2 of 2

Filing Fee: \$25.00