U3000010073

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600250230496

08/01/13--01008--005 **25.00

2013 AUG 16 PM 4: 27
SEURETARY DESTAIR
TALL ARIASSES FLORING

B. BOSTICK
AUG 1 9 2013
EXAMINER

COVER LETTÉR

TO:

Registration Section
Division of Corporations

SUBJECT:

knockout services

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:

	cameron waters			
	Name of Person			
	knockout services			
	Firm/Company			
	378 jefferson drive			
	Address			
	casselberry florida 32707	\vec{A}_{ij}	20	
	City/State and Zip Code		2013 AUG	
	cameronglenwaters@me.com	<u>유</u> 준		
	E-mail address: (to be used for future annual report notification)	0000	9	rumer.
For further information co	oncerning this matter, please call:	mik Ma		; ! * *
cameron wa	aters 321,-695-6129	70.17 70.17	44:27	
Name o	f Person Area Code & Daytime Telephone Number		7	

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, Fi. 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

knockout services, LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our re a Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Florida document number L13000010073	Company were filed on <u>01/22/2013</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the des	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		7 2
(Principal office address MUST BE A STREET ADD	DRESS)	T. 3
		AH 20 11
		SS o
Enter new mailing address, if applicable:		एंट 😇 हो।
(Mailing address MAY BE A POST OFFICE BOX)		65 -
	Mark - Are - No.	8 2 2
B. If amending the registered agent and/or registered agent and/or the new registered office ad		ls, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	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 Changing Registered Agent, Signature of New Registered Agent

A STATE OF S

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 <u>Title</u> <u>Name</u> **Address Type of Action CHARLIE WYATT MGR** 779 EAST BAY AVENUE LONGWOOD FL 32750 Remove 378 JEFFERSON DRIVE **CAMERON WATERS** MGR CASSELBERRY FL 32707 Remove Remove Remove

D. If amending a	any other information, enter change(s) here: .(.!ttach additional sheets, if necessary.)
7/25/2	013
_	ameran Allatera
	Signature of a member or authorized representative of a member
CA	MEORN WATERS
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 AUG 16 PM 4: 27



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 2, 2013

CAMERON WATERS 378 JEFFERSON DRIVE CASSELBERRY, FL 32707

SUBJECT: KNOCKOUT SERVICES LLC

Ref. Number: L13000010073

2013 AUG 16 PM 4:27
SECRETARY OF STATE
TALL AHASSET FLORIDA

We have received your document for KNOCKOUT SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 313A00018650

Barbara Bostick Regulatory Specialist II

www.sunbiz.org