

LI3000050646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

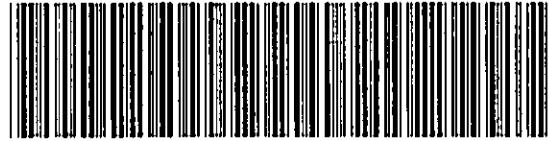
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200338715572

01/09/20--01011--017 \*\*25.00

FILED

20 JAN -9 PM 1:12

STATE OF TEXAS  
FALLS COUNTY CLERK'S OFFICE



FEB - 4 2020

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Play'n Hooty Fishing Charters LLC  
Case of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing

Please return all correspondence concerning this matter to the following

-- Ramsey Drummond  
Name of Person

Play'n Hooty Rentals LLC  
LLC Company

18500 San Carlos Blvd  
Address

Fort Myers Beach, FL 33931  
City State and Zip Code

-- amedeiros@n6live.com  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call

William Spargur  
Name of Person

Area Code 239

Daytime Telephone Number 444-6116

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 necessary)

\$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is necessary)

Mailing Address:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32313

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Play'n Hooky Fishing Charters LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/05/2013 and assigned Florida document number L13000050646

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Play'n Hooky Rentals LLC  
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC," or the abbreviation "LLC."

Enter new principal offices address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

FILED  
20 JAN -9 PM 1:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent

New Registered Office Address

*(New Florida office 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 602, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

20 JAN -9 PM 1:12  
FILED



D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FILED  
20 JAN -9 PM 1:12  
SLOAN COUNTY  
FALLS, OREGON

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

*(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) (Asuant to ORS 0207.134.01)*

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated January 6, 2020

  
\_\_\_\_\_  
*(Type or print name of signor)*

Kimonda Drummond  
*(Type or print name of signor)*