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D. SCOTT MAY 1 1 2017

COVER LETTER

TO:	Registration Se Division of Cor						
CIIDI	OH BOY, I		*	·			
SUBJE	SCT:		ited Liability Company				
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	return all correspo	endence concerning this matter	to the following:				
		Michael J. Faehner, Esq.		•			
			Name of Person				
		M. Faehner, Esq., LLC					
			Firm/Company				
		600 Bypass Drive, Suite 1	00				
			Address				
		Clearwater, FL 33764					
			City/State and Zip Code				
		filings@mfaehner.com					
		E-mail address: (to be used for future annual report not	fication)			
For fur	ther information co	oncerning this matter, please c	all:		IXS:		
Micha	el Faehner		727 443-5190 at ()		E SE	MA	77
	Name o	f Person	Area Code Daytin	e Telephone Number	1382 CT OT	HAY OO PH	FILED
Enclose	ed is a check for th	ne following amount:			51.77 51.77	?	
\$2:	5.00 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 Statu Certified Copy (additional copy is encl		: 32	

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

OH BOY, LLC		
(<u>Name of the Limited L</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	.
The Articles of Organization for this Limited Liabil Clorida document number L13000052263	hity Company were filed on 04/09/2013	and assigned
his amendment is submitted to amend the following	ng:	
a. If amending name, enter the new name of the	e limited liability company here:	
he new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
<u>Principal office address MUST BE A STREET A</u>	DDRESS)	
nter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE BOX</u>	<u> </u>	
	,	
	•	
 If amending the registered agent and/or in egistered agent and/or the new registered office 	registered office address on our records, <u>ente</u>	r the name of the n
egistered agent and/or the new registered office	address here.	FO F T
Name of New Registered Agent:		一
		Mag c
New Registered Office Address:	Enter Florida street address	-//
	Enter r torida street address	r
	Enter riorida street adaress . Florida	2:3

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 605, 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>	Address	Type of Action
MGR	Candyman Management, LLC	468 4TH AVENUE SOUTH	■ Add
		ST PETERSBURG, FL 33701	□ Remove
			Change
MGR	REPKO, ROBERT	468 4TH AVENUE SOUTH	Add
		ST PETERSBURG, FL 33701	■ Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
•			□ Remove
			三 <u>三</u> 三三 三三 三三 三三 三三 三三 三三 三三 三三
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			22. Change
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			□ Change

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fective date, if other than the neffective date is listed, the date mote: If the date inserted in this cument's effective date on the	ust be specific and cannot be block does not meet the a	e prior to date of filing applicable statutory	or more than 90 days afte	
record specifies a delaye The 90th day after the re		ut not an effecti	ve time, at 12:01	a.m. on the earlier
May 9	2017	·		3*
Mix :	falle			
	Signature of a member o	r authorized represent	ative of a member	
Michael J. Faehner, E.	SO.			

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Filing Fee: \$25.00