

h13 000054963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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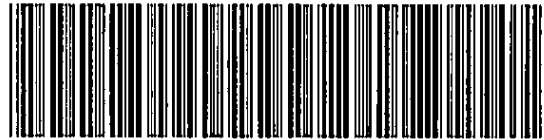
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 APR 15 PM 10:20

T. MATTHEWS

MAY 18 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shooting Fever LLC.

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:

Eduardo Luis Galindo

Name of Person

Shooting Fever LLC.

Firm/Company

12905 S.W. 132nd St. STE 1

Address

Miami FL 33165

City/State and Zip Code

Egalindo3500@gmail.com

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

For further information concerning this matter, please call:

Eduardo Galindo

Name of Person

at (785) 205-9215

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 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

22 APR 15 PM 10:20

Shooting Fever 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 4-15-2013 and assigned
Florida document number L13000054963.

This amendment is submitted to amend the following:

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

The 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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Eduardo Luis Galindo

New Registered Office Address:

12905 S.W. 132nd ST STE 1

Enter Florida street address

Miami

City

Florida

33186

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 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.

Eduardo Luis Galindo

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>
MGR	Anthony Michael Delgado	12905 S.W. 132nd St. STE 1	<input type="checkbox"/> Add
		Miami FL. 33186	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Eduardo Luis Galindo	12905 S.W. 132nd St. STE 1	<input checked="" type="checkbox"/> Add
		Miami FL. 33186	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Luis Rodriguez JR.	12905 S.W. 132nd St STE 1	<input checked="" type="checkbox"/> Add
		Miami FL. 33186	<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

[illegible]

(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.) Pursuant to 605.0207 (3)(b)

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 04/08/2022

Anthony N. Nappo
Signature of a member or authorized representative of a member

Anthony DELSILDO
Typed or printed name of signer