

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PłCK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



100427888271

64/22/24--01019-098 ++25.00

0024 APR 22 PM 2: 15 SECKETARY OF STATE

COVER LETTER

Division of Cor			
Fighting Iri	sh I, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
T			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Christopher Kearney		
		Name of Person	
	Amendment and fee(s) are submitted for filing. Christopher Kearney Name of Person Fighting Irish I, LLC Fim/Company 79 Orchard Hill Road Address Carmel NY 10512 City/State and Zip Code plooty40@yahoo.com E-mail address: (to be used for future annual report notification) concerning this matter, please call: 1914 1799-0863 101 Person Area Code Daytime Telephone Number he following amount: \$\infty\$ \$30.00 Filing Fee & \$\infty\$ Certificate of Status & Certificate Copy (additional copy is enclosed)		
		Firm/Company	
	79 Orchard Hill Road		
		Address	
	Carmel NY 10512		
	****	City/State and Zip Code	
			cation)
For further information c	oncerning this matter, please co	all:	
Christopher Kearney			
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status &
Mailing Addres			
Registration 9	Section	Registration Sec	tion

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

;

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

Fighting Irish I, LLC		
(Name of the Limited Liability Comps (A Florida Limited	iny as it now appears on our record Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Company	were filed on <u>06/19/2013</u>	and assigned
Florida document number L13000088783		
This amendment is submitted to amend the following:		
a. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity 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)		024 SEC
		<u> </u>
		AAR AAR
Inter new mailing address, if applicable:		R22 PA
Mailing address MAY BE A POST OFFICE BOX)		
		FA :
		[L] O1
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres:	,
		orida
	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 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or remov	<u>ed from our records</u> :		
MGR =	Manager		
AMBR =	Authorized Member		

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Add
			□ Remove
			Change
			□Add
			□Remove
			Change
			
			□Remove
			
			□ Remove
			□ Add
			□ Remove
			□ Change

and Grace Kearney as Jo	oint Tenants with Rights to Survivorship (JTWROS)	
		-
		-
		-
		-
		_
		_
		-
		-
		_
		-
		-
		-
		_
<u></u>		-
		-
lote: If the date inserted in th	the date of filing:	5.0207 ted as
record specifies a delayed effe is filed.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
ated April 15	2024	
· -		
()		

Filing Fee: \$25.00