## 113000129512

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J. SAULSBERRY EXAMINER OCT 2 1 2019 J. SAULSBERRY EXAMINER

## **COVER LETTER**

TO:

Registration Section

Divisio	n of Corpo	rations					
cupicor.		LIGHTEN	IING BUGZ 1	I.C.			
SUBJECT:		LIGHTENING BUGZ, LLC  Name of Limited Liability Company					
The enclosed Ar	ticles of An	nendment and fee(s) are su	bmitted for filing.				
Please return all	correspond	ence concerning this matte	r to the following:				
		ANNA MANUKYAN					
	Name of Person						
	ROCKET LAWYER						
	Firm/Company						
		5668 E. 61ST STREET					
	Address						
COMMERCE, CA 90040					2013		
			City/State and Zip C	ode		8 6	
			morris53@aol.d	om			
	•	E-mail address: (	to be used for future an	nual report notification	on)	$\frac{1}{2}$ $\frac{1}{2}$	
For further infor	mation con	cerning this matter, please	call:			2013 OCT 18 RM III: 17	
	ΔΝΝΔ	MANUKYAN	at ( 800 )	46'	2-5487	<u> </u>	
	Name of Po	<del> </del>		Code & Daytime Tel			
Enclosed is a che	eck for the	following amount:					
\$25.00 Filing	3 Fee [	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing I Certified Cop (additional co		S60.00 Filing Certificate of Certified Co (additional of	of Status &	)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Reg Divi Clif 266	REET/COURIER istration Section ision of Corporation fon Building 1 Executive Center ahassee, FL 32301	ns			

## ,ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lightening E	Bugz, LLC			
( <u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) Liability Company)	_		
The Articles of Organization for this Limited Liability Company	were filed on 9/13/2013	and assigned		
Florida document numberL13000129512				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
Flyerwork				
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation	'LLC" or the abbreviation		
Enter new principal offices address, if applicable:	1635 Shepherds Glade Dr.			
(Principal office address MUST BE A STREET ADDRESS)	Apex, NC 27523			
		22 23		
Enter new mailing address, if applicable:	PO Box 67328	<u></u> .		
(Mailing address MAY BE A POST OFFICE BOX)	St. Pete Beach, FL 33736	4.		
B. If amending the registered agent and/or registered of		the name of the new		
registered agent and/or the new registered office address her	<u>e</u> :	•		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street ac	ldress		
	, 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

'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:

MGR = Manager

MGRM = Managing Member Title Title **Address Type of Action** <u>Name</u> MGR Andrew Matlock PO Box 67328 ✓ Add St. Pete Beach, FL 33736 Remove Remove ☐ Add ☐ Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 25 2013 Dated Signature of a member of authorized representative of a member Kathleen:Morris Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00