L14000027936

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M. MILLIGAN EXAMINER

MAR 24 2014

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

CHARKTANK 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:

CHARLETTE CUMMINGS

Name of Person

CHARKTANK LLC

Firm/Company

4941 HAVERHILL COMMONS CIRCLE #18

Address

WEST PALM BEACH FL 33417

City/State and Zip Code

freedomtwoworkfromhome@yahoo.com

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

For further information concerning this matter, please call:

Charlette Cummings

_{at} 561

502-4883

Name of Person

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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

14 MAR 20 11 10 59

OF

CHARKTANK 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 2/21/2014 and assigned Florida document number L140000027936 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 end with 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: New Registered Office Address: Enter Florida street address , Florida

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

~ 7 } If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Willie James Hudson Jr.	H94 Haverhill Commons Circle #18 West Palm Beach FI 3341	7 _■ Add
			🗆 Remove
AMBR	Charlette Cummings	494 Haverhill Commons Circle #18 West Palm Beach FI 33417	
of Will	remain AMB2		□ Remove
····			□ Add
			_□ Remove
			_□ Add
			_□ Remove _
			_□ Add
			_□ Remove
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D.	If am	ending any other information, enter change(s) here: (A	ttach additional sheets, if necessary.)
	(The eff the da	tive date, if other than the date of filing: fective date must be specific, cannot be prior to date of receipt or filed date this document is filed by the Florida Department of State)	(optional) ate and cannot be more than 90 days after
	Dated	3/14/2014 Louff D. 1	
		Signature of a member or authorized	representative of a member
		Charlette Cummings	

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Filing Fee: \$25.00