L14000057481

(Re	equestor's Name)	
(Ad	Idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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	tegistration Sec Division of Corp		y -			
ematec.		Ordnance LLC	·			
SUBJECT	· :	Name of Lim	ited Liability Company			
The enclos	sed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please retu	ırn all correspor	ndence concerning this matter	to the following:			
		Preston E Mishikaiw	a			
			Name of Person			
		Predator Ordnance I	LLC			
			Firm/Company			
		2115 Raymonds Place				
		Address				
		Green Cove Springs	s, FI 32043			
			City/State and Zip Code			
		preston@predatororo				
		E-mail address: (1	to be used for future annual report notific	cation)		
For further	r information co	ncerning this matter, please ca	all:			
Preston	E Mishikaiv	va	904 210-2539			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed i	s a check for the	e 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**

ARTICLES OF C	AMENDMENT O ORGANIZATION OF Inv as it now appears on our records. Clability Company April 8, 2014 and assigned
Predator Ordnance LLC	inv as it now appears on our records.)
(Name of the Limited Liability Compa (A Florida Limited) The Articles of Organization for this Limited Liability Company Florida document number L14000057481 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	were med on and assigned
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2175 Kingsley Avenue Unit 315
Principal office address MUST BE A STREET ADDRESS)	Orange Park, FI 32073
Enter new mailing address, if applicable:	2115 Raymonds Place
(Mailing address MAY BE A POST OFFICE BOX)	Green Cove Springs, FI 32043
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, 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 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 amonding 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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Matthew Byatt	2175 Kingsley Avenue Unit 315	## Add
		Orange Park, FI 32073	□ Remove
			Add
			Remove
			Pemove
			□ Remove
			□ Remove
			Remove

).	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
	,
Ē.	Effective date, if other than the date of filing:
	Dated October 25 2014
	Preston & Mustikana
	Signature of a member or authorized representative of a member
	Preston E Mishikaiwa
	Typed or printed name of signee

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Filing Fee: \$25.00