

L14000058805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

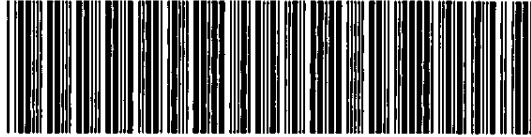
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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JAN 08 2016

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 5, 2016

MARIANNA V. MAGUIRE
3440 RILEY FUZZELL ROAD, SUITE 120
SPRING, TX 77386

SUBJECT: PARA BELLUM_OTC,LLC
Ref. Number: L14000058805

We have received your document for PARA BELLUM_OTC,LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason
Regulatory Specialist II

Letter Number: 116A00000225

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Para Bellum Operator Training Center (PBOTC), 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:

Marianna V. Maguire
Name of Person

Para Bellum Operator Training Center (PBOTC), LLC.
Firm/Company

3440 Riley Fuzzell Road, Ste 120
Address

Spring, TX 77386
City/State and Zip Code

mماغuire@parabellumotc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marianna V. Maguire at (832) 592-7245
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**

Para Bellum - OTC, 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 April 10, 2014 and assigned Florida document number L14000058805.

This amendment is submitted to amend the following:

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

Para Bellum Operator Training Center (PBOTC), LLC.

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)

3440 Tiley Fuzzell Road
Suite 120
Spring, TX 77386

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

City, Florida

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 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
AMBR = Authorized Member

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TALLAHASSEE, FLORIDA

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Marianna V. Maguire	3440 Riley Fuzzell Rd. Suite 120 Spring, TX 77386	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Leslie A. Saballos	9221 SW 134 Pl. Miami, FL 33186	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Jennifer N. Saballos	9221 SW 134 Pl. Miami, FL 33186	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	Stephen A. Maguire, Jr.	3440 Riley Fuzzell Rd. Suite 120 Spring, TX 77386	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
AMBR	Eric T. Beckdol, Sr.	9221 SW 134 Pl. Miami, FL 33186	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
AMBR	Adrian Amaro	9221 SW 134 Pl. Miami, FL 33186	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

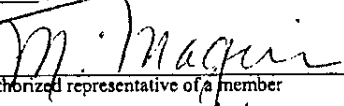
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please make the following changes to the LLC's
2015 FL LLC Amended Annual Report "Authorized
Person(s) Detail" section:

- ① Marianna V. Maguire Title: Owner-CEO/AZO
Address: 3440 Riley Fuzzell Road, Ste 120, Spring TX 77386

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
the date this document is filed by the Florida Department of State)

Dated _____



Signature of a member or authorized representative of a member

Marianna Maguire

Typed or printed name of signee

- ② Stephen A. Maguire, Jr.
Title: Advisor
Address: 3440 Riley Fuzzell Road
Suite 120
Spring, TX 77386

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Filing Fee: \$25.00

- ③ Jennifer N. Saballos
Title: Owner-- Marketing and Advertising
- ④ Leslie A. Saballos
Title: Owner- Instructor/Operator

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TALLAHASSEE, FLORIDA

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