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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Reel Tactical Sport Fishing, LC 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:
Richard G. Zahn Name of Person
Reel Tactical Sport Fishing, LLC
1540 International Pkny #2000
Lake Mary, FI 32746
CEVENS & Zmg Construction - Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rachard G. Zuhn at (407) Hub - 2305 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) 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

Peel Tuctical S	port Fishing	, LLC
(A Flor	oility Company as it now appears ida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Florida document number 114000 888	Company were filed on 0	0/03/2014 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here	:
The new name must be distinguishable and contain the words "Li	mited Liability Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable:		833
(Mailing address MAY BE A POST OFFICE BOX)		F 1
B. If amending the registered agent and/or regi- registered agent and/or the new registered office add	stered office address on or dress here:	ir records, enter the name of the nev
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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Title Address **Type of Action** Name ☐ Remove □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove _□ Change _□ Add ☐ Remove

☐ Change

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
,		
Note:	ive date, if other than the date of filing:	(3)(l the
If the red (b) The	cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of 90 th day after the record is filed.	;
Dated	Signature of a member or authorized representative of a member	
	Fighwal Zahn Typed or printed name of signee	

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Filing Fee: \$25.00