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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 2 Vikings, 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:	
Robert W. P.ckens, Jr.	
Firm/Company	
107 Driftwood Lane Address	
George town, FL 32139 City/State and Zip Code	
2 VIKINGS LLC @ gmail. com E-mail address: (to be used for future annual report notification)	
,	
For further information concerning this matter, please call:	
Robert W. Pickens Jr. at (386) 937 - 0950 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$60.00 Filing Fee &	atus &

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

<u> </u>
any as it now appears on our records.) Liability Company)
were filed on 7 14 2014 and assigned
27
bility company here:
ility Company," the designation "LLC" or the abbreviation "L.L.C."
107 Driftwood Lane
George town , FL 32139
P.D. Box 38
P.O. BOX 38 SAN MATED 7L 32187
SAN MATED 71 32187 office address on our records, enter the name of the re:
SAN MATED 71 32187 office address on our records, enter the name of the re: + W. Pickens Jr.
SAN MATED 71 32187 office address on our records, enter the name of the re:
SAN MATED 7L 32187 office address on our records, enter the name of the re: + W. Pickens, Jr. Or, ftwood Lane
,

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Joe H Pickens	125 Wood bury Tr	Add
-		Satsuma, FL 32189	🏿 Remove
-			Change
MGR	Robert W. Pickens, Ir	107 Daftwood Lane	ጃ Add
		Georgetown, FL 32139	Remove
			Change
AMBR	Joe H Pickens	125 Wood bury Tr	
		Satsuma, FL 32189	≰ Remove
			Change
AMBR	Robert W. Pickens, Ir	107 Driftwood Lane	0 x Add
		George town, FL 32139	Remove
			☐ Change
			Remove
			Change
		···	Add
		7 (7) 2 (6) 	Remove
			Change

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n effective date is fisted, die da	his block does not me	eet the applicable star	tutory filing requiren	nents, this date v	vill not be listed a
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Page 3 of 3

Filing Fee: \$25.00