

L14000139627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

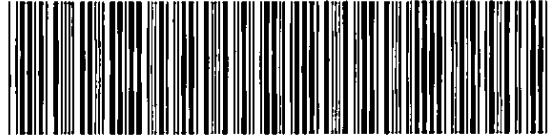
(Business Entity Name)

(Document Number)

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10 JUN 29 AM 9:27
CLERK OF COURT

2018 JUN 29 AM 9:37
SECRETARY OF STATE
CLERK OF COURT

FILED

K. SALY
JUN 29 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Crabs On The Run, 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:

Shanya Green
Name of Person

Crabs On The Run, LLC
Firm/Company

1875 oakridge Rd E
Address

Tallahassee FL 32304
City/State and Zip Code

Crabsontherun02@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shanya Green at (850) 556-7881
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Crabs On The Run, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2016 JUN 23 AM 9:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08/04/14 and assigned
Florida document number L14000139627.

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 contain 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)

1875 Oakridge Rd E
Tallahassee FL 32305

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1875 Oakridge Rd E
Tallahassee FL 32305

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:

Kyong Green

New Registered Office Address:

1875 Oakridge Rd E
Enter Florida street address

Tallahassee, Florida 32305
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.

Kyong Green
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>	<u>Address</u>	<u>Type of Action</u>
MGR	Jahve McCray	2833 south adams St 704	<input type="checkbox"/> Add
		Tallahassee FL 32301	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Damoni Hollis	1703 coreywood circle	<input type="checkbox"/> Add
		Tallahassee FL 32304	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Shanya Green	1703 coreywood circle	<input type="checkbox"/> Add
		Tallahassee FL 32304	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2018 JUN 29 AM 9:38
TALLAHASSEE
REMOVED
ADDED


FILED

FIL
2006 JUN 29
SECRETARY
ALIASSEE.

FILED
2008 JUN 29 AM 9:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated June 29, 2018.


 Signature of a member or authorized representative of a member

Shanya Green
 Typed or printed name of signee