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(((H16000117948 3)))



H160001179483ABC4

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To:

Division of Corporations

Fax Number : (850),617-6383

From:

Account Name : FORSYTH & BRUGGER, P.A.

Account Number : I20040000147 Phone

: (239)263-6000

Fax Number

: (239)263~6737

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Brail Address: Kevin Dbeachbugz.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BEACH BUGZ, LLC

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COVER LETTER

TO:		ration Secon of Corp	ction porations			
SUBJI	B	ЕАСН ВІ	JGZ, LLC			
30001	BC1:		Name of Lim	Name of Limited Liability Company		
The en	closed A	rticles of a	Amendment and fee(s) are sub	mitted for filing.		
Please	return al	l correspoi	ndence concerning this matter	to the following:		
			JOHN N BRUGGER			
				Name of Person		
			FORSYTH & BRUGGER	, P.A.		
				Firm/Company		
			600 5TH AVE S., SUITE	207		
				Address		
			NAPLES, FL 34102			
				City/State and Zip Code	······································	
			JBRUGGER@FORSYTHE			
				to be used for future annual report not	ification)	
For fur	ther info	rmation co	oncerning this matter, please of	all:		
JOHN N BRUGGER				239 263-6000		
		Name of	Person		ne Telephone Number	
Enclos	ed is a ch	eck for th	e following amount:			
= \$ 2:	5.00 Filir	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is evelosed)	
		Registra Division P.O. Bo	NG ADDRESS: tion Section t of Corporations x 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

BEACH BUGZ, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our rec Liability Company)	ords.)
he Articles of Organization for this Limited Liability Company	were filed on 09/16/2014	and assigned
lorida document number L14000144408		•
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "I	LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	944 7TH AVENUE N	
Principal office address MUST BE A STREET ADDRESS)	NAPLES, FL 34102	
· · · · · · · · · · · · · · · · · · ·		FAS 16
nter new mailing address, if applicable:	944 7TH AVENUE N	CRET T
Malling address MAY BE A POST OFFICE BOX)	NAPLES, PL 34102	S 2 1
Juling duaress WAT BE A POST OFFICE BOAT	····	779 = 111
		- S & C
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her Name of New Registered Agent:		ords, enter the name of the
New Registered Office Address:	Enter Florida street ad	ldress
		, Florida
	City	Zip Code
ew Registered Agent's Signature, if changing Registered Agent:	-	

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

Page I of 3

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	<u>Name</u>	Address	Type of Action
MGR	SMITH, ADAM	P.O. BOX 1309	DAdd
		NAPLES, FL 34102	■ Remove
			☐ Change
MGR	WOOD, KEVIN B.	944 7TH AVE N	
		NAPLES, FL 34102	□ Remove
			□ Chânge
			□ Add
			□ Remove
			Change
			□ Add
			Remove
			Change Change A C C A C C A C C C A C C C C C C C C
<u> </u>			Remove
			CRA Of Add
			□ Remove
			Change

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	than the date of fi	iling: and cannot be prior to d	late of filing or more than e statutory filing requi	(optional) 190 days after filing.) Purements, this date will	usuant to 605.0207 (3)(b I not be listed as the
E. Effective date, if other (If an effective date is listed, the Note: If the date inserted document's effective date	l in this block does no	of State's records.			
Note: If the date inserted document's effective date for the record specifies a	in this block does no on the Department of delayed effective	of State's records. ve date, but not a	n effective time, a	at 12:01 a.m. on	the earlier of:
E. Effective date, if other (If an effective date is listed, to Note: If the date inserted document's effective date if the record specifies a (b) The 90th day after Dated MAY 12	in this block does no on the Department of delayed effective	of State's records. ve date, but not a	n effective time, a	TALL	the earlier of:

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