

L14000154268

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100269218571

03/10/15--01008--008 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAR 10 PM 12:54

C.L.
4-1-15

DAVID E. PLATTE, P.A.
ATTORNEY AT LAW

ALSO ADMITTED IN COLORADO
AND IOWA

1465 SOUTH FT. HARRISON AVENUE, SUITE 202
CLEARWATER, FLORIDA 33756

WWW.DEPLATTELAW.COM

TELEPHONE (727) 461-0420
FACSIMILE (727) 461-5655

WRITER'S DIRECT EMAIL ADDRESS

March 5, 2015

Registration Section
Division of Corporation
PO Box 6327
Tallahassee, FL 32314

Re: Amendment to PEEDEE HYDROGRAPHICS LLC; FL DOC #L14000145268

To Whom it May Concern,

Enclosed, please find our check no. 1105 in the amount of \$25.00 for the changes to be made on the above-referenced LLC.

Should you have any questions or concerns, please feel free to contact our office at the number listed above.

Sincerely,



Carol Heald
Assistant to Paul Platte, Esq.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PEEDEE HYDROGRAPHICS 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:

PAUL PLATTE

Name of Person

PAUL PLATTE, P.A.

Firm/Company

1465 S. Fort Harrison Avenue, Suite 202

Address

Clearwater, Florida 33756

City/State and Zip Code

assistant@deplattelaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Platte

727
at ()

461-0420

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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAR 10 PM 12:55

PEEDEE HYDROGRAPHICS

(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 10/2/2014 and assigned
Florida document number L14000154268.

This amendment is submitted to amend the following:

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

COSMIC COWBOY HATS 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)

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Paul Platte	1465 S. Ft. Harrison Avenue, Suite 202	<input type="checkbox"/> Add
		Clearwater, FL 33756	<input checked="" type="checkbox"/> Remove
MGRM	Paul Platte	1465 S. Ft. Harrison Avenue, Suite 202	<input checked="" type="checkbox"/> Add
		Clearwater, FL 33756	<input type="checkbox"/> Remove
AMBR	Travis Lupton	130 Union School Road	<input checked="" type="checkbox"/> Add
		McBee, SC 29101	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

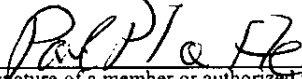
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 MAR 10 PM 12:55

E. Effective date, if other than the date of filing: 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 3/3, 2015.


Signature of a member or authorized representative of a member

PAUL PLATTE
Typed or printed name of signee