## L14000174317

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## **COVER LETTER**

TO:

Registration Section

Division of Corporations				
to change g	reen swamp munitions to	FRON FIS	+ Armament LLC	
SUBJECT:		ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Alan F. Starbird			
		Name of Person		
	Green Swamp Munitions			
		Firm/Company	<del></del>	
	23512 N Buckhill Rd			
	<del></del>	Address		
	Howey in the Hills FLorid	a 34737		
		City/State and Zip Code		
	starbirdakd@hotmail.com	to be used for future annual report no	infection)	
For further information of	concerning this matter, please c			
Alan Starbird		352 978-8422		
	of Person	at () Area Code Daytii	ne Telephone Number	
Enclosed is a check for t	he 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)	
<u> Mailing Addre</u>		Street Address:		
Registration Division of G			Registration Section Division of Corporations	
P.O. Box 63	-	The Centre of		
Tallahassee,		2415 N. Monr	oe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.)	<del></del>
The Articles of Organization for this Limited Liability Company	were filed on 11/10/2014	and assigned
Florida document number L14000174317		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
IronFist Armament L.L.C.		
he new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:	23512 N Buckhill Rd	
Principal office address MUST BE A STREET ADDRESS)	Howey in the hills Florida 34737	
		•
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nau	e of the new reg
gent and/or fire new registered brince address nerv.		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	PAREL LIDITARI SIVEEL CARDESS	

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 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>	Name	Address	Type of Action
Mr.	Jason Smith	23512 N Buckhill Rd	<b>=</b> Add
		Howey inthe hills Florida 34737	□Remove
			Change
			□Add
			□Remove
			□ Change
			Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□ Change
			□Add
			□ Change

fo —	r the purpose of changing the name only.
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'an effe <del>Vote:</del> I	re date, if other than the date of filing: D/Dec 203 (optional) ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a nt's effective date on the Department of State's records.
record I is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
ated _	01, Dec 2023 Man 7 Sla Co
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00