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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

12/22/2020

Date:

	Acc#I20160000072
Name:	Calkun Captive LLC
Document #:	
Order #:	13409281
Certified Copy of Arts & Amend:	
Plain Copy: Certificate of Good Standing:	
Apostille/Notarial Certification:	Country of Destination: Number of Certs:
Filing: 🗸	Certified: ✓ Plain: COGS:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 55.00
	Thank you!

COVER LETTER

TO: Registration Division of C			
	N CAPTIVE LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Philip Tortorich		
		Name of Person	
	Actuate Law LLC		
		Firm/Company	
	641 W. Lake Street, Ste 50	00	
		Address	
	Chicago, IL 60661		
		City/State and Zip Code	
	philip.tortorich@actuatelaw	com to be used for future annual report no	outication)
For further information	on concerning this matter, please c		
Philip Tortorich		312 579-3129	
Nar	ne of Person	Area Code Dayt	me Telephone Number
Enclosed is a check f	or the following amount:		
\$25.00 Filing Fe	e S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
_	dress: on Section of Corporations	Street Address: Registration S Division of C	
P.O. Box	6327	The Centre of	Tallahassee
Tallahass	ee, FL 32314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CALKUN CAPTIVE LLC		
(<u>Name of the Limited Li</u> : (A Flo	ability Company as it now appears on our record orda Limited Liability Company)	rd <u>s.</u>)
The Articles of Organization for this Limited Liabili Horida document number 1.14000191422		and assigned
This amendment is submitted to amend the following	ā:	
A. If amending name, enter the new name of the	limited liability company here:	
CALKUN HOLDINGS, LLC		
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable Principal office address MUST BE A STREET AL		
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BON</u>	<u> </u>	
3. If amending the registered agent and/or regis agent and/or the new registered office address he	tered office address on our records, <u>ent</u> e <u>re</u> :	er the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	tress
		Florida
-	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.

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>	Type of Action
			□Add
		□Remove	
			Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□ Change
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			Remove
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iote:	tive date, if other than the date of filing:
reco I is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after thilled.
atec	December 2 2020
aitt	Mau
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00