÷.,



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000091552 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

| | Division of Cor Fax Number | : (850)617-6383 | 1111 |
|-------|-------------------------------|---|---------|
| From: | | | :- :- |
| | Account Name | : GASSMAN, CROTTY & DENICOLO, P.A. | 0 |
| | Account Number | : 075350000514 | |
| | Phone | : (727)442-1200 | |
| | Fax Number | : (727)443-5829 | - |
| | | | |
| Enter | the email addres | s for this business entity to be used for f | uture 😂 |

Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HAMMER HAAG THINK TANK, L.L.C.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu C

Corporate Filing Menu

Help

r

ć.

5

÷

03/10/2022 1:59PM FAX 7274435829

ļ

Audit Fax# II22000091552 3

•

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| The Articles of Organization for this Limited Liability Company | ware filed on 03/17/2015 | and assigned |
|--|--|---|
| Florida document number L15000048353 | | |
| Iorida document number | | |
| This amendment is submitted to amend the following: | | |
| 4. If amending name, enter the new name of the limited liab | | |
| | | |
| The new name must be distinguishable and contain the words "Limited Liabil | ity Company," the designation "LLC" or | the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 120 South Monroe | |
| (Principal office address MUST BE A STREET ADDRESS) | Tallahassee, FL 32301 | |
| | | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ |
| Enter new mailing address, if applicable: | 120 South Monroe | |
| (Mailing address MAY BE A POST OFFICE BOX) | Tallahassee, FL 32301 | |

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: | DAVID RAMBA, ESQ. | |
|--------------------------------|-------------------|------------------------|
| New Registered Office Address: | 120 South Monroe | 71 |
| | Enter I | Florida street address |
| | Tallahassee | , 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

Audit Fax# H22000091552 3

03/10/2022 2:00PM FAX 7274435829

_ Change

Audit Fax# H22000091552 3 MGR = Manager AMBR = Authorized Member Type of Action <u>Title</u> Name Address MGR KEVIN HAMMER 2840 W BAY DR #256 _ 🗆 Add BELLEAIR BLUFFS, FL 33770 Remove Change JONATHON GOLDRATH 12 DITCH PLAINS ROAD MGR ∎Add 3922 MONTAUK, NY 11954 Remove Ο Change . 115 KELBOURNE AVENUE MGR ROBERT PEASE. ≣⊿વી 8 SLEEPY HOLLOW, NY 10591 Remove Change □Add Remove Change _ 🗆 Remove ___ 🗆 Change _ 🗌 Add Remove

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

.

;

: . . .

.

:

:

÷

:

:
;

:

;

Audit Fax# H22000091552 3

| | ······································ |
|---|---|
| | |
| | |
| | |
| | |
| | 2 |
| | 172 172 |
| | |
| | |
| | |
| | |
| · · · · · · · · · · · · · · · · · · · | |
| | |
| | |
| | |
| | |
| | |
| | |
| the last of the state of filling | (optional) |
| ive date, if other than the date of filing: | of filing or more than 90 days after filing.) Pursuant to 605.0 |

If the record 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 record is filed.

| Dated _ | Marigh 9, 2022 |
|---------|--|
| | Signature of a member or authorized tepresantative of a member |
| | KENNETH J. CROTTY ASQ., Authonized Representative |
| | Typed or printed name of signee |