

Aug. 12, 2015 11:59AM

Crichton Mullings

No. 0006 P. 1

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CRICHTON MULLINGS & ASSOCIATES PA  
Account Number : I20070000038  
Phone : (954)862-2250  
Fax Number : (954)862-2251

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

Email Address: johnmcfarlane2@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
RING TAIL LLC

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER

AUG 13 2015

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: RING TAIL 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:

DAWN STIMPSON

Name of Person

CRICHTOMULLINGS & ASSOCIATES PA

Firm/Company

3350 SW 148TH AVENUE SUITE 203

Address

MIRAMAR, FL 33027

City/State and Zip Code

ADMIN-US@CRICHTONMULLINGS.COM

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

For further information concerning this matter, please call:

DAWN STIMPSON

at ( 954 ) 862-2250  
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

Aug. 12. 2015 11:59AM

CrichMullins  
**LES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

No. 0006 P. 3

**FILED**

2015 AUG 12 AM 8:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RING TAIL LLC

(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 APRIL 20, 2015 and assigned  
Florida document number L15000068605.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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*

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 an Aug. 12, 2015 Fri 11:59 AM on(s) Crichton Mullins manage, enter the title, name, and address cNo. 0006 ersoP. 4 ing 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>
D	ROHAN CRICHTON	5231 SW 149TH AVE	<input checked="" type="checkbox"/> Add
		MIRAMAR, FL 33027	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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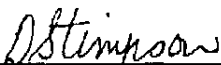
**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 AUGUST 12, 2015

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

DAWN STIMPSON

\_\_\_\_\_  
Typed or printed name of signee