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Office Use Only



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SECRETARY OF STATE

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COVER LETTER

TO:		ution Sect of Corpo				
		ely Hook	ed, LLC			
SUBJI	ECT:		Name of Limi	ted Liability Company		
The en	iclosed Art	icles of A	mendment and fee(s) are sub-	nitted for filing.		
Please	return all o	correspond	dence concerning this matter t	to the following:		
			Erin N McGinnis			
				Name of Person	,	
			Purely Hooked, LLC			
				Firm/Company		
			3236 Beaver Drive			
				Address	·	
			Clearwater, FL 33761			
				City/State and Zip Code		
			nicky@purelyhooked.com	n to be used for future annual r	enort notifica	ation)
For fu	rther infor	mation cor	ncerning this matter, please co		•	,
Erin N McGinnis				1-2357		
		Name of I	Person	Area Code	Daytime T	'elephone Number
Enclo	sed is a ch	eck for the	following amount:			
■ \$2	25.00 Filin	g Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl		☐ \$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

Purely Hooked, LLC		
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears o d Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Compar Florida document number L15000069798	ny were filed on $\frac{4/21}{}$	2015 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lig	ibility company here	:
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) Mization for this Limited Liability Company were filed on 4/21/2015	
Enter new mailing address, if applicable:		70 7
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he Name of New Registered Agent:		ur records, enter the name of the nev
New Registered Office Address:		
	Enter Floride	street address
	Cuv	
New Registered Agent's Signature, if changing Registered Agen	·	
I hereby accept the appointment as registered agent and as provisions of all statutes relative to the proper and comple	gree to act in this cap te performance of m s provided for in Chi	y duties, and I am familiar with and upter 605, F.S. Or, if this document is

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>	Name	Address	Type of Action
MGR	Joe T McGinnis Jr	3236 Beaver Drive	
		Clearwater, FL 33761	■ Remove
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ective date, if other than th	e date of filing:		(optio		05.030
neffective date is listed, the date m te: If the date inserted in this	block does not meet the appl	icable statutory filin	ore than 90 days aner g requirements, this	date will not be li	sted as
rument's effective date on the	Department of State's record	s.			
	ad affaarliin data lei bi b	at an affactive t	ima at 13:01 =	m on the east	lios o
record specifies a delayon The 90th day after the re		ocan enective t	iine, at 12:01 d	.m. on the ear	nei 0
July 31	2018				
(CI)		·			
)				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00