

LIS 000 129508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

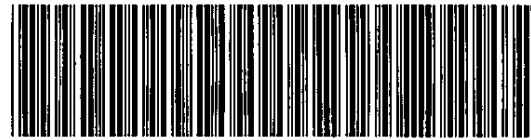
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS

O SIMMONS

OCT 13 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ANGELS of ECSTASY.com, 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:

MICHAEL HAGBERTY
Name of Person

OWNER
Firm/Company

2833 N.W. 21st Ave
Address

CAPE CORAL FL 33993
City/State and Zip Code

AROUND THE CLOCK SHIPPING @GMAIL.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL HAGBERTY at 305, 879-4477
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

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

Angels of Ecstasy.com, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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DIVISION OF CORPORATIONS

The Articles of Organization for this Limited Liability Company were filed on 7-29-2015 and assigned Florida document number L15000129508

This amendment is submitted to amend the following:

ADUIT ENTERTAINMENT PRODUCTS, LLC

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

ADUIT ENTERTAINMENT PRODUCTS, LLC

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)

MICHAEL HAGGERTY
2833 N.W. 21ST AVE
CAPE CORAL FL 33993

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

MICHAEL HAGGERTY
2833 N.W. 21ST AVE
CAPE CORAL FL 33993

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:

MICHAEL HAGGERTY

New Registered Office Address:

2833 N.W. 21ST AVE

Enter Florida street address

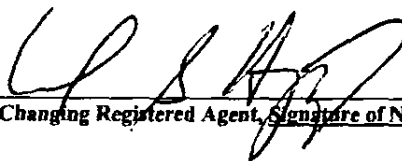
CAPE CORAL, Florida 33993

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

Title	Name	Address	Type of Action
Asst Mgr	DALE MERRON	50 Old Beach Rd	<input checked="" type="checkbox"/> Add
		Newport R.I.	<input type="checkbox"/> Remove
		02890	<input type="checkbox"/> Change
		646-613-1347	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Director of Operations	MARIC HARRISON	2833 21st Ave	<input checked="" type="checkbox"/> Add
		Cape Cod Rd #1	<input type="checkbox"/> Remove
		33993	<input type="checkbox"/> Change
		305 896-6013	<input type="checkbox"/> Add
			<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
			<input type="checkbox"/> Change

16 OCT 22 AM 9:13
 DIVISION OF CONSTRUCTION

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ADDRESS IS NOW 2833 N.W. 215th Ave
Cape Coral FL 33993

Any and All Information is to
be sent to ABOVE ADDRESS -

The Register Agent is now -

MICHAEL HAGGERTY
2833 N.W. 215th Ave
Cape Coral FL 33993
305 879-4477

DIVISION OF CORPORATIONS

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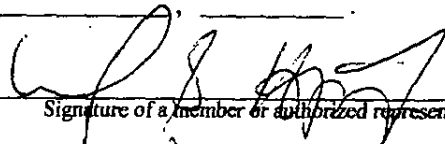
E. Effective date, if other than the date of filing: on receipt (optional)

(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 10/6/19



Signature of a member or authorized representative of a member

MICHAEL HAGGERTY

Typed or printed name of signer

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
16 OCT 12 AM 9:13
DIVISION OF CORPORATIONS

Angels of Ecstasy.com, 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 7-29-2015 and assigned Florida document number L15000129508

This amendment is submitted to amend the following:

ADULT ENTERTAINMENT PRODUCTS, LLC.

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

ADULT ENTERTAINMENT PRODUCTS, LLC

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)

MICHAEL HAGGERTY
2833 N.W. 21ST AVE
CAPE CORAL FL 33993

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

MICHAEL HAGGERTY
2833 N.W. 21ST AVE
CAPE CORAL FL 33993

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:

MICHAEL HAGGERTY

New Registered Office Address:

2833 N.W. 21ST AVE

Enter Florida street address

CAPE CORAL, Florida 33993

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.

[Signature]
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

Title	Name	Address	Type of Action
Asst mgr	DALE MERSON	50 OLD BEACH Rd	<input checked="" type="checkbox"/> Add
		Newport R.I.	<input type="checkbox"/> Remove
		02840	<input type="checkbox"/> Change
		646-613 1347	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Director of Operations	MAURICE HARGREY	2833 1st Ave	<input checked="" type="checkbox"/> Add
		CAPE CODAL #1	<input type="checkbox"/> Remove
		33993	<input type="checkbox"/> Change
		305 8964013	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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DIVISION OF CONSUMER AFFAIRS
 16 OCT 12 AM 9:13

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ADDRESS IS NOW 2833 N.W. 21st Ave
CAPE CORAL FL 33993

Any and All Information is to
be sent to ABOVE ADDRESS -

TM Register Agent is now -

MICHAEL HAGGERTY
2833 N.W. 21st Ave
CAPE CORAL FL 33993
305 879-4477

E. Effective date, if other than the date of filing: on receipt (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.

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(b) The 90th day after the record is filed.

Dated 10/6/19

[Signature]
Signature of a member or authorized representative of a member
MICHAEL HAGGERTY
Typed or printed name of signee

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