

L15000167252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

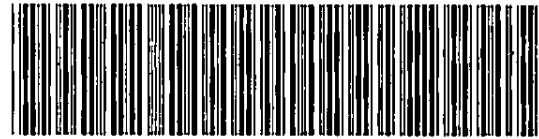
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100302285211

09/09/17--01014--010 **20.00

FILED

2017 AUG -9 P 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

n BRUCE
AUG 10 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAD Crazy Enterprises 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 Garrett
Name of Person
Vegan 2 GO
Firm/Company
7625 W. Newberry Rd
Address
Gainesville FL 32606
City/State and Zip Code
LVLNLTLLV115@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Garrett at 407 690 1331
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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 AUG - 9 P 12:35

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MAD Crazy Enterprises 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 10/11/15 and assigned
Florida document number L15000167252

This amendment is submitted to amend the following:

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

MAD JAM Enterprises 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)

7625 W. Newberry Rd
Gainesville FL
32606

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7625 W. Newberry Rd
Gainesville FL
32606

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:

(SAME) Michael Garrett

New Registered Office Address:

(New) 7625 W. Newberry Rd
Enter Florida street address
Gainesville Florida
City State

32606
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>	<u>Type of Action</u>
AR	Christine Kozlik	3001 N. Sheriff Dr	<input type="checkbox"/> Add
		Beverly hills FL 34465	<input checked="" 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
			<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

FILED
 2017 AUG - 9 P 12:35
 CLERK OF SUPERIOR COURT
 TALLAHASSEE, FLORIDA

2017 AUG - 9
SECRET
ALL HASSLE.

FILED
2017 AUG -9 P 12:33
CLERK OF DISTRICT COURT
ALLAHASSEE, FLORIDA

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.

Dated 8-5-17

Michael Garrett

Filing Fee: \$25.00