L15000197300

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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of C	or por actoris		
ANGRY	TROLL LABORATORY, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
		_	
ricase return all corres	pondence concerning this matter	to the following:	
	NELSON E. CEPEDA		
		Name of Person	
		Firm/Company	
	1316 AVON LANE, STE	37	
			
	NORTH LAUDERDALE,	FL 33068	
		City/State and Zip Code	
	angrytrolllab@gmail.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please ca	all:	
NELSON E. CEPEDA		754 213-2616	
Name of Person		at () Area Code Daytim	e 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 Addr		Street Address:	
Registration	Section Corporations	Registration Sec	
P.O. Box 63	-	Division of Cor The Centre of T	
	~ ·	The Centre of 1	ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

ANGRY TROLL LABORATORY, LLC

(A)	Florida Limited I	ny as it now appears on our record Liability Company)	<u>ls.</u>)
he Articles of Organization for this Limited Liabi lorida document number L15000197300	lity Company	were filed on 11/23/2015	and assigned
nis amendment is submitted to amend the followi	ng:		
. If amending name, enter the new name of th	e limited liab	ility company here:	
he new name must be distinguishable and contain the words	s "Limited Liabil	lity Company," the designation "LLC	C" or the abbreviation "L.L.C."
nter new principal offices address, if applicabl	e:		
(Principal office address MUST BE A STREET ADDRESS)			
nter new mailing address, if applicable:		P.O. BOX 590162	-7 -1
Mailing address MAY BE A POST OFFICE BOX)		FT. LAUDERDALE, FL 3335	
			- 13
. If amending the registered agent and/or regi gent and/or the new registered office address h		address on our records, enter	the name of the new regis
Name of Navy Registered Assets	NELSON E. CI	EPEDA	
Name of New Registered Agent.	NELSON E. CI		
Name of New Registered Agent.	NELSON E. CI P.O. BOX 5901	62	
New Registered Office Address:		62 Enter Florida street addre:	orida 33359

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>	Address	Type of Action
AMBR	GARY SKINNER	2510 SW 3RD AVE, FT. LAUDERDALE, FL 33316	_ □Add
			_ = Remove
			_ Change
			_ □Add
			_ 🗆 Remove
			□Change
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			12/07/20	20				
E. Effect (If an ef	tive date, if other than th ffective date is listed, the date m	i e date of fili just be specific a	ing:		filing or more th	(opti nan 90 days after	onal) r filing.) Pursuant to 60	05.020°
Note:	If the date inserted in this nent's effective date on the	block does no	t meet the app	licable statu	tory filing rec	uirements, thi	s date will not be li	sted as
	rd specifies a delayed effect	ive date, but n	ot an effectiv	e time, at 12	:01 a.m. on th	e earlier of: (b) The 90th day af	ter the
record is f	iled.							
D	DECEMBER 1		2020					
Dated	·		' 7 /	·	<u></u>			

Filing Fee: \$25.00