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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone #	¥)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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K.SALY EXAMINER DEC 15 2015

COVER LETTER

Điv	ision of Corpo	orations		
SHRIFCT.	Preferred Out	door Club LLC		
Soldieci.			ed Liability Company	
The enclosed	Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please return	all correspond	lence concerning this matter to	the following:	
		Smith, Daniel		
			Name of Person	
		Preferred Outdoor Club LLC	C	
Firm/Company				
		1001 W Eau Gallie Blvd #13	33	
			Address	
		Melbourne, FL 32935		
			City/State and Zip Code	•
		DanSmith1963@gmail.com	,,	
		·	be used for future annual report	notification)
For further in	formation con	cerning this matter, please cal	l :	
Daniel Smitl	h		321 271 825	·
	Name of P	erson	at () Area Code Da	ytime Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iling 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:

TO: Registration Section

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

ZNIc	FIL	ED
TALLENG	May OF TO SERVE	ED PM 2:58
• • •	OZEE L	5 3977

PREFERRED OUTDOOR CLUB 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

12/02/2015

and assigned

Florida document number L15000201568

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailling 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 Agent's Signature, if changing Registered Agent;

New Registered Office Address:

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

Enter Florida street address

_, Florida ___

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
MGR	Daniel Smith	1001 W Eau Gallie Blvd #133	■ Add
		Melbourne, FL 32935	☐ Remove
			Change
AMBR	Nicolle, Lochary	729 N Harbor City Blvd	
-		Melbourne, FL 32935	☐ Remove
			🛱 Change
			Charge PH 2: 58
			☐ Change
			Add
			□ Remove
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fective date, if other n effective date is listed, t	than the date of filing:	annot be prior to date of f	(0)	ptional) after filing.) Pursuant to 605,020
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cumon a creed ve dan	e on the Department of Sta	ic a records.		
	delayed effective date the record is filed.	te, but not an effe	ective time, at 12:0	1 a.m. on the earlier o
12/08/2015				
ited	,			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00