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· (F	Requestor's Name)
A)	Address)
(A	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(C	Occument Number)
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SECRETARY OF STATE

SECRETARY SEE, FLORIDA

More

COVER LETTER

TO: Registration Se Division of Con			
Guns Gone	e Wild LLC		
SUBJECT:	Name of Limi	ted Liability Company	
	Amendment and fee(s) are subsondence concerning this matter to	-	
	Jonathon Collazo		
	-	Name of Person	
	Guns Gone Wild LLC		
		Firm/Company	
	20846 sw 89th pl		
		Address	
	Cutler Bay, FL 33189		
	jellazo68@gmail.com	City/State and Zip Code	
		o be used for future annual report notifi	cation)
For further information of	concerning this matter, please ca	ıll:	
Jonathon Collazo		786 371-5205 at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	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

SEGREBIO PH 200 Guns Gone Wild 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 January 28, 2016 and assigned Florida document number L16000020304 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) P.O. Box 971866 Enter new mailing address, if applicable: Miami, FL 33197 (Mailing 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 Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
MGR	Jonathon Collazo	20846 sw 89th pl	≅ Add
		Cutler Bay, FL 33189	☐ Remove
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