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K.S.?LY EXAMINE APH - 7

COVER LETTER

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SUBJECT: _	Me	ichel	Arma	ment	LLC		
	•		Name of Lin	nited Liability	Company		, , , , , , , , , , , , , , , , , , ,
The enclosed A	rticles of A	Amendment and	i fee(s) are sub	omitted for f	ïling.		
Please return all	l correspoi	ndence concern	ing this matter	to the follo	wing:		
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		<u> </u>	Jona	than Name	Kichar e of Person	O	Weichel
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			We	<u>ichel</u>	Armam- /Company	ent	· LLC
				riiii	Company		
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					r future annual re	eport no	otification)
For further info	rmation co	ncerning this n	atter, please c	eall:			
Jonath	nan	Weiche		at (239, 3	01-	8917
Name of Person			ur (Area Code	Dayti	ime Telephone Number	
•							
Enclosed is a ch	neck for the	c following am	ount:				
\$25,00 Filir	ng Fee	□ \$30.00 Fil Certifica	ing Fee & te of Status	Cert	00 Filing Fee & ified Copy tional copy is enclo	osod)	□ \$60.00 Filing Fec, 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

TO ARTICLES OF ORGANIZATION OF

Weichel Armament LLC

ARTICLES	OF ORGANIZATION OF	S// 12
•	Or	2016 AD EL
Weichel Ar	mament LLC	APP -4 PM
· · · · · · · · · · · · · · · · · · ·	Company as it now appears on ou Limited Liability Company)	20/6 APR -4 PM 3:56
The Articles of Organization for this Limited Liability Co	ompany were filed on02_	101/2010 and assigned
Florida document number _ L 16 0000 21300		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registoregistered agent and/or the new registered office address.		records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stred	et address
	City	Florida
	<i>0.1.j</i>	Esp Couc

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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address Type of Action
AMBR	Jonathan R. Weichel	B45 Grenada Ave Lehign Acres, FL 33974 MAdd
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an effective da	ate is listed, the da	in the date of fili ate must be specific a	and cannot be prior	to date of filing or mo	ore than 90 days aft	t ional) er filing.) Pursuant to 6	05,020
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		Signature of	a member or abtho	zed representative	of a member		
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