1100028601

(Requestor's Name)
(Address)
(Address)
	City/State/Zip/Phone #)
	WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
	Office Use Only



10/10/17--01024--003 **30.00





COVER LETTER

Division of Corporations SUBJECT: <u>Let it Raw Seamless Guitters. LLC</u> 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:

For further information concerning this matter, please call:

at (727) 481-0785 Area Code Daytime Telephone Number ellysmaye

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

TO:

Registration Section

□ \$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 A							
ARTICLES OF ORGANIZATION OF							
	//						
(Name of the Limited Liability Compan (A Florida Limited Li	SS (outters LLC vasil now appears on our records.)						
The Articles of Organization for this Limited Liability Company v	vere filed on <u>021101 2016</u> and assigned						
Florida document number <u>L16000028601</u> .							
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limited liabil	ity company here:						
The new name must be distinguishable and contain the words "Limited Liabilit	y 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)							
	· <u> </u>						
	متاکنا دی. ۱۹۰ - میلید ۱۹۶۱ - میلید						
Enter new mailing address, if applicable:	······································						
(Mailing address MAY BE A POST OFFICE BOX)							
	- 1 فعد 						
	· - · · ·						
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:	ice address on our records, enter the name of the new						
Name of New Registered Agent:	Kelly J Maye						
New Registered Office Address:	2412 Q3rd way Enter Florida street address						
	City City 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

•

Title	Name	Address	Type of Action
Pres	Bryan Tellsren		O Add
			Remove
		12412 93. cl way largo 337	Change
VP	Kelly Maye		🗆 Add
			C Remove
		12412 93rd vay Largo 33772	🛱 Change
Pres	Kelly maye	12412 93rd way Large 33	<u>}}</u> ⊠arAdd
			Remove
			Change
<u>v7</u>	BryantTellsren	12412 93:0 way Laiso F	773 X Add
		-	: <u>8</u>
		······	Rēmove
		·	Change
			🗆 Add
		<u> </u>	D Remove
			Change

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Plaine Kelly Mas (10) 5 11 "let it Pa Cramless LLC ellsrew will Fill H Vice President CEN tion VAC: 20F2 SERIA ON Due to confusion with ALSO Bryas offic, Securi Tell Crew So t midel Fucene - Taylor e condu ddle_ tic 2 AN ι

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated October Sevens, 2017.			
Signature of a member of a uthorized representative of a member	J! - - - - -	2017 OCT 10	
Typed or printed name of signee	····		<u>t</u>
	۰ معر		•
Page 3 of 3		\mathbf{N}	

Filing Fee: \$25.00