Lloddo 3207

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
·		

Office Use Only



100291449941

10/24/16--01043--028 **25.00

OCT 25 2016 S. YOUNG SECRETARY OF STATES TALLAHASSEE, FLORIDA

COVER LETTER

Division of Co	orporations			
OUD IDOT.	d Hijinx, LLC			
SUBJECT:	Name of Limi	ted Liability Company		
The enclosed Articles o	f Amendment and fee(s) are subr	mitted for filing.		
Please return all corresp	condence concerning this matter t	to the following:		
	Lisa Midgett			
		Name of Person		
	Havoc and Hijinx, LLC			
		Firm/Company		
	9750 NW 160th ST			
	····	Address	***************************************	- 75°
	Reddick, FL 32686			ALLAHASSEE FLORIDA 16 OCT 24 PM 4: 07
	lisaAmidgett@gmail.com	City/State and Zip Code		124
		o be used for future annual report notifi	cation)	PA PAS
For further information	concerning this matter, please ca	dl:		F. 95
Lisa Midgett		352 427-5815 at ()		
Name	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for	the following amount:	. ha /		
\$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 Sta Certified Copy (additional copy is ea	atus &

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**

mpany as it now appears on our rec	ords.)
any were filed on 02/17/16	and assigned
iability company here:	
iability Company," the designation "I	LLC" or the abbreviation "L.L.C."
	· · · · · · · · · · · · · · · · · · ·
	SECRETAL PARTIES
9750 NW 160th ST	OCT 24
Reddick, FL 32686	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	ords, enter the name of the no
Enter Florida street add	dress
	Montale
City ,	Florida Zip Code
ent;	
	9750 NW 160th ST Reddick, FL 32686 I office address on our reconere: Enter Florida street 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

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>	<u>Address</u>	Type of Action
MGR	Mekaella Lord	1721 NE 36TH AVE #6	□ Add
		Ocala, FL 34470	■ Remove
			☐ Change

			□ Remove
			☐ Change
			SECRETARY SECRET
			Change Change
			□ Remove
			☐ Change
		+447-4411	Add
			Remove
			☐ Change
 			□ Add
			□ Remove
			☐ Change

· ·	
	
•	
	
	· · · · · · · · · · · · · · · · · · ·
	16 OCT 24
	<u> </u>
	5 S.S. S.S. S.S. S.S. S.S. S.S. S.S. S.
	PH 4: 07
	27
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more that the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective time, The 90th day after the record is filed.	at 12:01 a.m. on the earlier of
Pated 10/14/14	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00