

L16000044698

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H16000074160 3)))



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**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850) 617-6383

From:  
Account Name : LEGALZOOM.COM INC.  
Account Number : I20010000062  
Phone : (323) 962-8600  
Fax Number : (323) 962-3899

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MOSSEY HEAD BAIN COMPANY, LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 06      |
| Estimated Charge      | \$55.00 |

RECEIVED

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JANUARY 11, 2016

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 MAR 24 AM 10:01

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Electronic Filing Menu Corporate Filing Menu

From:

03/21/2016 14:01

#074 P.001/004

**COVER LETTER**

*FAX  
323-962-4521*

**TO: Registration Section  
Division of Corporations**

**SUBJECT: MOSSEY HEAD BAIN COMPANY, LLC**

*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:

Cheyenne Mosceley

*Name of Person*

Legalzoom.com, Inc.

*Firm/Company*

101 N Brand Blvd., 10th Floor

*Address*

Glendale, CA 91203

*City/State and Zip Code*

gileprice@embarqmail.com

*E-mail address: (to be used for future annual report notification)*

For further information concerning this matter, please call:

Inelda Vasquez

323 962-8600 ext 7950

*Name of Person*

*at ( ) Area Code*

*Daytime Telephone Number*

Enclosed is a check for 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

From:

03/21/2016 14:01

#074 P.002/004

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

MOSSEY HEAD BAIT COMPANY, 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 03/03/2016 and assigned  
Florida document number L16000044698.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Mossy Head Bait Company, LLC

The new name must be distinguishable and end with 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:**

(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

Florida

City

Zip 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**

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

From:

03/21/2016 14:02

#074 P.003/004

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
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TALLAHASSEE, FLORIDA

From:

03/21/2016 14:02

#074 P.004/004

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

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 03/21/2016

*Gilbert E. Price*

Signature of a member or authorized representative of a member

Gilbert E. Price

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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2016 MAR 24 A 10:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA