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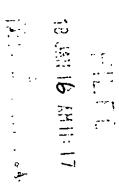
| (Requestor's Name) | | | | | |
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| (4.11) | | | | | |
| (Address) | | | | | |
| (Address) | | | | | |
| | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| | | | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| (Sosamon Hamber) | | | | | |
| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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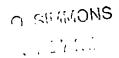
Office Use Only



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COVER LETTER

| TO: · Rep Div | gistration Se ision of Cor | ction porations | | , | | | |
|------------------|-------------------------------|---------------------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|--|--|--|
| SUBJECT: | White Light | ts Kitchen LLC | | | | | |
| object. | | Name of Li | mited Liability Company | | | | |
| | | Amendment and fee(s) are sundence concerning this matte | | | | | |
| | | Daniel BenjaminSchlen | | | | | |
| | Name of Person | | | | | | |
| | | White Lights Kitchen | | | | | |
| | Firm/Company | | | | | | |
| | | 3051 Yorktown Circle | | | | | |
| | Address | | | | | | |
| | | Fort Walton Beach FL 32547 | | | | | |
| | | blacksheepbarbell@gma | City/State and Zip Code | | | | |
| For further inf | formation cor | E-mail address: | to be used for future annual report notific | cation) | | | |
| Dan Schlemr | | | 850 387-5404 | | | | |
| Name of Person | | Area Code Daytime 1 | Telephone Number | | | | |
| Enclosed is a | check for the | following amount: | | | | | |
| □ \$25.00 Fil | | ■ \$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**

| White Lights Kitchen | | | |
|---------------------------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------------|--------------------------------------|
| (Name of the Lim | ited Liability Compa (A Florida Limited) | ny as it now appears on our reco Liability Company) | rds.) |
| The Articles of Organization for this Limited I | Liability Company | were tiled on April 10th, 201 | and assigned |
| This amendment is submitted to amend the fol | lowing: | | |
| A. If amending name, enter the new name | of the limited liab | ility company here: | |
| Black Sheep Barbell LLC | | | |
| The new name must be distinguishable and contain the | words "Limited Liabi | lity Company," the designation "L | LC" or the abbreviation "L.L.G." |
| Enter new principal offices address, if appli | cable: | 3051 Yorktown Circle | |
| (Principal office address MUST BE A STREET ADDRESS) | | Fort Walton Beach,FL | - 6 |
| | | 32547 | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| Mailing address MAY BE A POST OFFICE | (BOX) | | 1,50 |
| · · · · · · · · · · · · · · · · · · · | | | |
| B. If amending the registered agent and registered agent and/or the new registered of | d/or registered of | fice address on our recor g: | ds, <u>enter the name of the nev</u> |
| Name of New Registered Agent: | Daniel Schlem | mer | |
| | DanielSchlem 3051Yorktowr | | |
| Name of New Registered Agent: New Registered Office Address: | | | C.12 |
| | | Circle Enter Florida street addi | Florida 32547 |

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** _□ Add _□ Remove ☐ Change _□ Add <u>:</u>□ Add 🔂 □ Remov _ Change _D Add □ Remove _□ Change _□ Remove ☐ Change □ Add □ Remove

☐ Change

| 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: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more th Note: If the date inserted in this block does not meet the applicable statutory filing req document's effective date on the Department of State's records. | (optional) an 90 days after filing.) Pursuant to 605.0207 (3)(buirements, this date will not be listed as the |
| If the record specifies a delayed effective date, but not an effective time (b) The 90th day after the record is filed. | , at 12:01 a.m. on the earlier of: |
| Dated 5 5AV . 2018 | |
| Signature of a member or authorized representative of a r | nember |
| DANIEL SCHLEMMER Typed or printed name of signer | ······································ |
| Typed or printed name of signee | |

Page 3 of 3

Filing Fee: \$25.00