

L160000070096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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☐

MAIL

(Business Entity Name)

(Document Number)

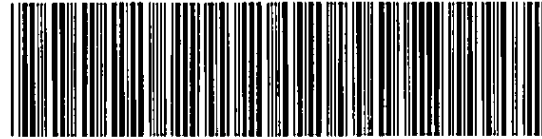
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CLERK OF STATE
JANUARY 11

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Epic Paddle Adventures, 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:

Richard Glynn Gallagher

Name of Person

Epic Paddle Adventures, LLC

Firm/Company

1600 North Orange Avenue

Address

Orlando, FL 32804

City/State and Zip Code

epicpaddleadventures@gmail.com

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

For further information concerning this matter, please call:

Richard Glynn Gallagher

407

925-6570

at (_____) _____

Name of Person

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Epic Paddle Adventures, 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 April 8, 2016 and assigned
Florida document number L16000070096.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1600 North Orange Avenue, Suite 7

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32804

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:

Richard Glynn Gallagher

New Registered Office Address:

1600 North Orange Avenue

Enter Florida street address

Orlando

City

Florida

32812

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.


Richard Glynn Gallagher

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>	<u>Type of Action</u>
MGR	Richard Glynn Gallagher	6906 Daetwyler Drive	<input checked="" type="checkbox"/> Add
		Orlando, FL 32812	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jennifer Louise Brown	6906 Daetwyler Drive	<input type="checkbox"/> Add
		Orlando, FL 32812	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Jennifer Louise Brown transferred ownership and all assets to Richard Glynn Gallagher on March 21st, 2021.

Richard is now the Registered Agent and Manager of Epic Paddle Adventures, LLC.

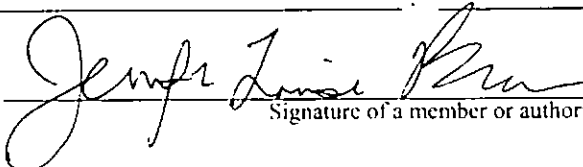
E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 December 17 2021



Signature of a member or authorized representative of a member

Jennifer Louise Brown

Typed or printed name of signee