# L16000011874

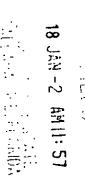
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S. WARREN JAN 0 3 2018

# **COVER LETTER**

TO:	Registration Sec Division of Corp			
SUB	JECT:	Vildhawk L Name of Lim	ited Liability Company	
The	enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Pleas	se return all correspor	idence concerning this matter	to the following:	
		Richa	Name of Person	
			Dildhauk LLC Firm/Company	
		1307 0	Nix on Blud Address	
			FL 22922 City/State and Zip Code  Cle vcloprents Part notion be used for future annual report notions.	nail com
For f	urther information co	encerning this matter, please co		,
	Richard Name of	Haw K Person	at (321 ) SOG- Area Code Daytim	O467 re Telephone Number
Encl	osed is a check for the	e following amount:		
o :	S25.00 Filing Fee		□ \$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

Wildha	wk LLC	· · · · · · · · · · · · · · · · · · ·				
(Name of the Limite	ed Liability Company as (A Florida Limited Liabil	it now appears on ou ity Company)	<u>r records.</u> )			
The Articles of Organization for this Limited Lia		e filed on $\frac{4/o}{}$	7/2016	and	l assign	ed
Florida document number <u>L16.00071</u>	<u> 874</u> .					
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liability	company here:				
The new name must be distinguishable and contain the we	ords "Limited Liability C	ompany," the designati	on "LLC" or the al	bbreviation	1 "L.L.C.	***
Enter new principal offices address, if applica	able:					
(Principal office address MUST BE A STREE)	<u>T ADDRESS)</u>					
	-		<u> </u>			
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE I	BOX)					
				::.	8	
				: -	72	
B. If amending the registered agent and/o		address on our	records, <u>enter</u>	the nai	me of	the new
registered agent and/or the new registered of	lice address here:			ŗ.,	=	Ö
Name of New Registered Agent:	Rich	ard Hunk				
New Registered Office Address:	1307 0	Enter Florida stre	et address	25.	<b></b>	<del></del>
	Cococ	<b>~</b>	, Flo <b>rida</b>	3143	<b>7</b>	
		City		Zip Ce	ode	

### 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 = M AMBR = A	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Richard Howok Change to Manager)	1307 Dixon Blich (co	a FLO Add
(	(Change to Manager)	35078	Remove
			▼ Change
			Remove
			Change
APMO	( Remore Prom Catifus)		
	( Remore from Catifus)	7050 Ackerman Ave	Remove
		7050 Ackerman Ave Cooka FL 32927	Change
			☐ Remove
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	ive date, if other t	han the date of filing: _		(op	tional)
E. Effect	English data in listed, the		mor oc biloi to ame or mink		
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Filing Fee: \$25.00