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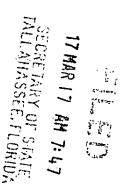
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COVER LETTER

SUBJECT: Caddi	eshack Gelf Co Name of Limite	art Sales and de Liability Company	d Repair LLC
The enclosed Articles of Am	nendment and fee(s) are subm	itted for filing.	
Please return all corresponde	ence concerning this matter to	the following:	
	Michael San	Name of Person	
	Caddieshack Go	IF Cart Sales a Firm/Company	nd Repair LLC
	700 S. Smith	Ave. Address	
	Inverness Fl,		
-	cadlieshacksoles E-mail address: (to	be used for future annual rep	ort notification)
	erning this matter, please call		
Michael San Name of Pe	tos rson	at (<u>352</u>) <u>63</u> Area Code	SY-1910 Daytime Telephone Number
Enclosed is a check for the fo	oflowing amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

Caddie Shack Golf Co	act Sales and Repair LL	
(Name of the Limited Lia (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liabilit	y Company were filed on <u>5/19/2016</u>	and assigned
This amendment is submitted to amend the following	Ç.	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and contain the words "l	Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	AR BA
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
Maning address MAT BE AT OBT OFFICE BOX		
B. If amending the registered agent and/or re registered agent and/or the new registered office a	-	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	ida
-	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

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 Authorized Member	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael Santos	328 S. Adams st.	
		Beverly Hills, F1 34465	□ Remove
			Change
MGR	Pierre Santos	328 S. Adams st.	□ Add
		Beverly Hills, FL 34465	□ Remove
			5 Change
AMBR	Nicholas Haros	505 E Benjamin st	
		Hernando, Fl 34442	Remove
			Change
AMBR	Patrick Owens	321 E hatie st.	🗆 Add
		Hernando, F1 34442	Remove
			Change
			Add
			☐ Remove
			□ Change
11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Add
			□ Remove
			Change

Percentage of Ownership	Michael Santos: 51% Pierre Santos: 49%
Address appears as 700 Smin	th st. Iverness FL
Address should be 700 S.S. 34453	mith Ave. Inverness Fi
	A SECRETARY AREA
	ARY OF ST.
Effective date, if other than the date of filing: fan effective date is listed, the date must be specific and cannot be prior to date Note: If the date inserted in this block does not meet the applicable sidocument's effective date on the Department of State's records.	
ne record specifies a delayed effective date, but not an The 90th day after the record is filed.	effective time, at 12:01 a.m. on the earlier o
Dated March 14 th , 70 M. Signature of a member or authorized	representative of a member
Michael Santos Typed or printed nam	

Page 3 of 3

Filing Fee: \$25.00