

L16 000 102 589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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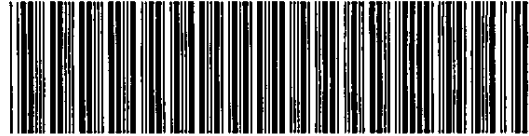
(Business Entity Name)

(Document Number)

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JUN 20 2016

S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GO HARD PERFORMANCE 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:

ROBERTO MENDOZA

Name of Person

Firm/Company

6416 LAKE SUNRISE DR

Address

APOLLO BEACH, FL 33572

City/State and Zip Code

ROBERT.MENDOZA0001@GMAIL.COM

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

For further information concerning this matter, please call:

ROBERTO MENDOZA

813 405-9607
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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

GO HARD PERFORMANCE 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 MAY 25, 2016 and assigned
Florida document number L16000102589.

This amendment is submitted to amend the following:

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

GO HARD PERFORMANCE LLC

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:

6416 LAKE SUNRISE DR

(Principal office address MUST BE A STREET ADDRESS)

APOLLO BEACH FL 33572

Enter new mailing address, if applicable:

6416 LAKE SUNRISE DR

(Mailing address MAY BE A POST OFFICE BOX)

APOLLO BEACH FL 33572

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:

ROBERTO MENDOZA

New Registered Office Address:

6416 LAKE SUNRISE DR

Enter Florida street address

APOLLO BEACH

, Florida 33572

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MR	DAVID J SOLER JR	6416 LAKE SUNRISE DR	<input checked="" type="checkbox"/> Add
		APOLLO BEACH FL 33572	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MR	KAREEM RAMSEY	1307 ECLES DR	<input checked="" type="checkbox"/> Add
		TAMPA FL 33612	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MR	ROBERTO MENDOZA	6416 LAKE SUNRISE DR	<input checked="" type="checkbox"/> Add
		APOLLO BEACH FL 33572	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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16 JUN 1968

16 JUN 77 PM 3:05
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FALLA
STATE DEPT. LOBBY

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.

(b) The 90th day after the record is filed.

Dated JUNE 14 2016

Signature of a member or authorized representative of a member

DAVID L. GOLDER, JR.

DAVID J SOLER JR.

Typed or printed name of signee