

116000119251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

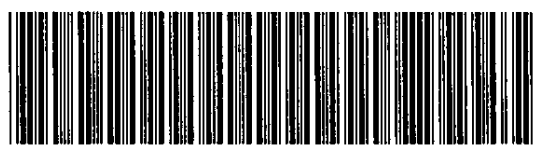
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
DEC - 5 2016

LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Brothers in Arms LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for:

Please return all correspondence concerning this matter to the following:

Keith Carver
Name of Person

Brothers Outdoors
Firm/Company

6325 Jarvis Rd
Address

Sarasota FL 34241
City/State and Zip

brothersinarmsFL@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aaron Fong 941 773 1917
Name of Person Area Code Daytime Telephone Number

- \$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

ARTICLES OF AMENDMENT
OR
ARTICLES OF ORGANIZATION
OF

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TALLAHASSEE, FLORIDA

Brothers in Arms LLC

(A Florida 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 June 17, 2016 and assigned
Florida document number: L16000119251

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

Brothers Outdoors LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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:

New Registered Office Address:

Enter Florida street address

Florida

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
provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with
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

Remove Authorized person(s) authorized to manage. enter the title, name, and address of each person being added
 removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Keith Carver	6325 Jarvis Rd	<input checked="" type="checkbox"/> Add
		Sarasota FL 34241	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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NOTE: 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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the date of 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.

Date: November 9 2016

Signature of a member or authorized representative of a member

AARON FONG

Typed or printed name of signer