## L16 000 175 761

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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(Document Number)				
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## **COVER LETTER**

	egistration Se vision of Cor					
SUBJECT:		DERS MOTORCYCLES,LLC				
SOBILCE		Name of Lim	ited Liability Company			
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please retur	n all correspo	ondence concerning this matter	to the following:			
		JAMES DUKES				
			Name of Person			
HELLBENDERS MOTORCYCLES,LLC.						
		<del></del>	Firm/Company			
		3225 FOX LAKE DR			22	
			Address	·	SEP	
		TAMPA, FL 33618			22 SEP -6 PM 3: 38	
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	<b>-</b>	
		DANIELJAYR@VERIZO			ယ္	
		E-mail address: (	to be used for future annual report notifi-	cation)	<u>ვ</u>	
For further	information co	oncerning this matter, please ca	all:			
DANIEL R	ROTHENBER	G	813 469-3638			
	Name o	f Person		Telephone Number		
Enclosed is	a check for th	ne following amount:				
<b>■</b> \$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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ty Company as it now appears on our records.) a Limited Liability Company)	
Company were filed on 9/20/2016	and assigned
<u>_</u> .	
ited liability company here:	
nited Liability Company," the designation "LLC" o	or the abbreviation "L.I.,C."
RESS)	
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	<u> 구 필</u>
	<u>မှ</u> မိုး
	<u> </u>
d office address on our records, <u>enter th</u>	e name of the new registered
Enter Florida street address	
	- ,
Flor	Zip Code
	company were filed on 9/20/2016  ited liability company here:  ited Liability Company," the designation "LLC" of RESS)  d office address on our records, enter the Enter Florida street address

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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ISABELITA GAOAT	3225 FOX LAKE DR	□Add
			■Remove
		TAMPA, FL 33618	□Change
MGR	RONALD CARL WESTENDORF	905 E 31ST AVE	<b>≣</b> AJd
			□Remove
		TAMPA. FL 33603	□ Change
			□Add
			22 Simple
			Change 9-
			□Remove
			□Change
			□Remove
			☐ Change
			□Add
			□Remove

Typed or printed name of signee