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(R	Requestor's Name)	
(A	Address)	
(A	Address)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT [MAIL
(B	Business Entity Name)	
(C	Document Number)	
Certified Copies	Certificates of Stati	us
Special Instructions to	o Filing Officer:	_

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COVER LETTER

HO: Registration S	rporations	***	, ·
	ns and Training, LLC	•	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	<u>-</u>	
	Gunnar Batista Farias		
		Name of Person	
	Tower Guns and Training.	LLC	
		Firm/Company	
	185 S Westmonte Drive, S	uite 1212	
		Address	
	Altamonte Springs, FL 327	714	
		City/State and Zip Code	
	towergunsinfo@gmail.com	to be used for future annual report notif	
For further information c	concerning this matter, please c	·	reamon)
Gunnar Batista Farias		407 234-9668	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		MAR II
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Capy (additional copy is enclosed)
Mailing Address		Street Address:	
Registration S		Registration Sec	tion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tower Guns and Training, LLC				
(<u>Name of the Lim</u>	ited Liability Comp (A Florida Limited	pany as it now appears of Liability Company)	on our records.)	
The Articles of Organization for this Limited leaders of Organization for the Limited Landscape of Control of	Liability Compan	y were filed on 02/06	/2017	and assigned
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited lia	bility company here	:	
N/A				
he new name must be distinguishable and contain the	words "Limited Liab	bility Company," the desi	gnation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if appl	icable:	N/A		
Principal office address MUST BE A STRE	ET ADDRESS)		- 	
Enter new mailing address, if applicable:		N/A		Ø
(Mailing address MAY BE A POST OFFICE BOX)			12.3	7021 MA
B. If amending the registered agent and/or agent and/or the new registered office addr		e address on our rec	ords, <u>enter the name</u>	e of the new regis
			.`.	بيا 📞
Name of New Registered Agent:	N/A		·:	2
New Registered Office Address:				
		Enter Florido	a street address	
			, Florida	
	·	City	·	Zip Code

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.

N/A	
If Changing Registered Agent, Signature of New Register	red 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>	Type of Action
AMBR	Tatiane de Pinho Perin	548 Olympic Village Apt. 104, Altamonte Springs,	
		Florida 32714	
AMBR	Marcio Perin	548 Olympic Village Apt. 104, Altamonte Springs,	
		Florida, 32714	□Remove
			Change
			□Add
		-13:	□Remove
			Change
			D T
		<u> </u>	□Change
			□Add
			□ Remove
			Change
			□Add
			□Remove
			Change

always have the final saying on a	any decision to be made in the name o	or in the interest of the LLC.	
No Member, nor Authorized Me	mber will have the final saying regard	ling any of the LLC's Business or	
Interest, unless Mr. Farias appro	ves it.		-
			
			
			
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	03/01/2021		
ective date, if other than the da	te of filing:	optional) ng or more than 90 days after filing.) Pursuant to	605.02
te: If the date inserted in this block current's effective date on the Department.	does not meet the applicable statutor	y filing requirements, this date will not be	listed
entitient de receive date on the pape			
ecord specifies a delayed effective dis filed.	ate, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day	after th
March 08	2021		
1PM	· · · · · · · · · · · · · · · · · · ·		