## 117000029245

(R	equestor's Name)
(A	ddress)
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J. LEGGETT

## **COVER LETTER**

		stration Sec ion of Corp		•		<b>s</b> .
CHD ICA		Task Ninja I				
SUBJEC	,l: <u> </u>		Name of Lim	ited Liability Company		
The encl	osed .	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn a	ill correspor	ndence concerning this matter	to the following:		
			Ryan Stahl			
				Name of Person		•
			Task Ninja LLC.			
SUBJECT The enclos Please return Ryan Stah				Firm/Company		•
			6208 French Creek Court			
				Address		,
			Ellenton, FL 34222			
				City/State and Zip Code		,
			rstahl@taskninza.com			
			E-mail address: ()	to be used for future annual report	notification)	
For furth	er inf	ormation co	oncerning this matter, please ca	all:		
Ryan Sta	ihl			317 9415985		
		Name of	Person	Area Code Da	eytime Telephone Number	
Enclosed	l is a c	theck for the	c following amount:			
<b>≅</b> \$25.0	90 Fil	ing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &

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 TO ARTICLES OF ORGANIZATION OF

Task Ninja LLC.					
(Name of the Limited (A	Liability Compa Florida Limited	i <mark>ny as it now appears on our r</mark> Liability Company)	ecords.)		
The Articles of Organization for this Limited Liab	oility Company	were filed on 2/6/2017	;	ınd assigr	ıed
Florida document number L17000029245	,				
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liab	oility company here:			
TaskNinza LLC.					
The new name must be distinguishable and contain the wor	ds "Limited Liabi	lity Company," the designation	"LLC" or the abbrevia	tion 📸 L.C	* **
Enter new principal offices address, if applicab	ole:	6208 French Creek Court	2.		
(Principal office address MUST BE A STREET		Ellenton, FL 34222		z	
			(17)	22	177
			2	王	O
Enter new mailing address, if applicable:		6208 French Creek Court		J. 0	
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	Ellenton, FL 34222	7	03	1
B. If amending the registered agent and/or registered agent and/or the new registered office			cords, <u>enter the</u>	name of	the nev
		<u> -</u>			
Name of New Registered Agent:	Ryan Stahl	· · · · · · · · · · · · · · · · · · ·			
New Registered Office Address:	6208 French Cr	reek Court			
		Enter Florida street a	ddress		
	Ellenton		_, Florida <u>34222</u>		
		City		o 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 uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Remove
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. Effective date, if other than the date of	filing		(optiona	ın.	
(If an effective date is listed, the date must be speci	fic and cannot be prior	to date of filing or mor	e than 90 days after fili	ng.) Pursuai	nt to 605,020
Note: If the date inserted in this block does document's effective date on the Departmen			requirements, this da	te will not	l be listed a
f the record specifies a delayed effect	ive date, but no	t an effective tir	ne, at 12:01 a.m	ı. on the	earlier (
b) The 90th day after the record is f	iled.				
January 16	2018				
Dated16		•			
Par Sall					
Signature	e of a member or author	orized representative o	f a member		

Page 3 of 3

Filing Fee: \$25.00