# L17000035355

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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# **COVER LETTER**

Division of Corporations
SUBJECT: Harley Riordan 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:
Harley Riordan Name of Person
Firm/Company
2948 OWEN Bell LIL
Pensacola, Fl 32507 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Harley Fiordan at (850) G37-5150  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee \& \Bigcup \\$55.00 Filing Fee \& \Bigcup \\$60.00 Filing Fee, \Bigcup \Bi

### 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

Harley Rio	rdan LLC	
(Name of the Limited Liab) (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number <u>L170000353</u> 4	Company were filed on <u>02//4/2017</u> 55	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
	·	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg		er the name of the new
		至道 第二二
Name of New Registered Agent:		17.25 - F
New Registered Office Address:		<b>原料 2 位</b>
· · ·	Enter Florida street address	The second secon
	, Florida	Zip Code
	\(\text{ii}\)	

### 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 $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Grayson Engan	6270 Hiltop Drive 32504 Pensacula F.L	Add
M GR	Trevor Barber	III Van Kirk Ave. 32503 Pensacola F.	□ Change
\\		32503 Pensacola F.	Remove
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ffective date, if	other than the date listed, the date must be sp	of filing: <u>Ø</u>	2/14/6	2017	(optiona	1)
ote: If the date	listed, the date must be spinserted in this block do ive date on the Departn	es not meet the	e applicable stat	f filing or more that utory filing requi	90 days after filing rements, this da	g.) Pursuant to 605.0 te will not be listed
record spec The 90th day	ifies a delayed effe	ctive date, l s filed.	out not an ef	fective time,	at 12:01 a.m	. on the earlier
	14/12017	4	1/			
ated <u>02/</u>	7/000	· · · · · · · · · · · · · · · · · · ·	<del></del>			

Page 3 of 3

Filing Fee: \$25.00