

L170000 41327

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

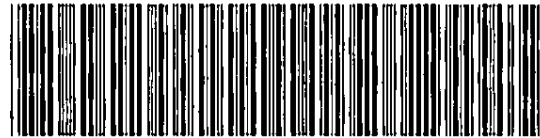
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ALL INFORMATION
NOT TO BE RELEASED

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JUL 05 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2018

MARVIN RAY SUBLETT
1690 NE 134TH ST
NORTH MIAMI, FL 33181

SUBJECT: CHAINWORK, LLC
Ref. Number: L17000041327

We have received your document for CHAINWORK, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brittany M Figueroa
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 818A00012667

RECEIVED

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DEPARTMENT OF
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CHAINWORK, 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:

MARVIN RAY SUBLETT

Name of Person

CHAINWORK, LLC

Firm/Company

1690 NE 134TH STREET

Address

NORTH MIAMI, FL, 33181

City/State and Zip Code

MARV@CHAINWORKPHYSIO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARVIN RAY SUBLETT

404 985-2351

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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
TO
ARTICLES OF ORGANIZATION
OF**

CHAINWORK, LLC

(Name of the 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 2/21/2017 and assigned
Florida document number L17000041327.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable: 1690 NE 134TH STREET, NORTH MIAMI, FL 33181

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 1690 NE 134TH STREET, NORTH MIAMI, FL 33181

(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:

MARVIN RAY SUBLETT, JR

New Registered Office Address:

1690 NE 134TH STREET

Enter Florida street address

NORTH MIAMI

City

Florida 33181

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 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 = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MARVIN RAY SUBLETT, JR	1690 NE 134TH ST, NORTH MIAMI, FL	<input checked="" type="checkbox"/> Add
		33181	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SUBLIME KINETICS, LLC		<input type="checkbox"/> Add
		7950 NE BAYSHORE CT, APT 1804	<input checked="" type="checkbox"/> Remove
		33138	<input type="checkbox"/> Change
MGR	ASHLEY WAYNE SCHNEIDER	1690 NE 134TH ST, NORTH MIAMI, FL	<input type="checkbox"/> Add
		33181	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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2018 JUN 29 AM 11:15
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE

FILED
2010 JUN 29 AM 11:15
FBI - ALBANY
ALBANY DISTRICT OFFICE

(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.) Pursuant to 605.0207 (3)(b)

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.

Dated _____

Signature of a member of authority

Signature of a member or authorized representative of a member

MARVIN RAY SUBLETT, JR

Typed or printed name of signee