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## COVERALETTER

TO: Registration Section Division of Corporations
SUBJECT: Top Notch Cants 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:
Jan Costello Name of Person
TOP Notch Can's LLC.
4613 Javelne St Address
Middle bung FL 32068  City/Surgand Zip Code  John Coste 1689 (a) Cimail. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tohn Costello at (904), U44-12163  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee

### 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 ARTICLES OF ORGANIZATION **OF**

Florida document number L 170000 43585

This amendment is submitted to amend the following:

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

Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	4613 Javeline St middle brog, FL, 32068			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	HIGHT TOURING St middle burg IFL, 32068			
B. If amending the registered agent and/or registered of	flice address on our records, enter the name of t			

registered agent and/or the new registered office address here:

John Costello Name of New Registered Agent: Enter Florida street address

Middleburg, Florida 32068

Zip Code New Registered Office 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

MGR = Ma AMBR = Au	nager ithorized Member		
<u> Fitle</u>	<u>Name</u>	Address	Type of Action
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		Jacksonvelle FL, 32210	Remove
			☐ Change
MUR	John Costello	4013 Javeline St	<b>S</b> (Add
		Middlebury FL , 32068	□ Remove
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Filing Fee: \$25.00