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### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 5, 2020

ADAM L TUCKER 10752 DEERWOOD PARK BLVD STE 100 JACKSONVILLE, FL 32256

SUBJECT: INTREPID LAW, LLC Ref. Number: L17000063416

We have received your document for INTREPID LAW, 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):

For an LLC to become a PLLC you will need to file articles of amendment to change the suffix from LLC to PLLC and then state the purpose in section D. of the amendment document. The purpose must be specific. (Even if you stated it previously in the articles, it still has to be stated.)

Please return 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) 245-6050.

Letter Number: 220A00014623

Rebekah White Regulatory Specialist II Supervisor

www.sunbiz.org

District of Control of DO DOY (2007 FE 1) 1 PRO 11 1 PRO 12 1 PRO

# **COVER LETTER**

TO:	Registration S Division of C			
SUBJ	ECT: Intrepid La	aw LLC		
		Name of Florida	Limited Liability Compan	у
Limit			ee(s) are submitted to c r Business Entity" in a	
Please	e return all corre	esponden <u>ce</u> concernin	g this matter to:	
Adam	L. Tucker			
		Contact Person		
Intrepi	id Law LLC	<u> </u>		
		Firm/Company		
10752	Deerwood Park B	lvd Suite 100		
		Address		
Jackso	nville, FL 32256		<u></u>	
	C	ity, State and Zip Code		
adam@	gintrepidlaw.com			
-	-	be used for future annual i	report notification)	
For fi	arther informati	on concerning this ma	atter, please call:	
Adam	L. Tucker		at (904) 829	-7039
Name of Contact Person		Area Code and Daytime Telephone Number		
Enclo	sed is a check f	for the following amou	ınt:	
<b>■</b> \$2:	5.00 Filing Fee	S30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Fee. Certified Copy, and Certificate of Status
Regis Divis P.O. I	ing Address: stration Section ion of Corporat Box 6327 hassee, FL 3231		The Centre of	Section Corporations of Tallahassee nroe Street, Suite 810

CR2E106 (05/17)

# **COVER LETTER**

TO:

Registration Section Division of Corporations

Intrepid Lav	w LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Adam L. Tucker		
		Name of Person	
	Intrepid Law LLC		
		Firm/Company	
	10752 Deerwood Park Blv	d Suite 100	
		Address	
	Jacksonville, Florida 3225	5	
		City/State and Zip Code	
	adam@intrepidlaw.com		
	E-mail address: (	to be used for future annual report notifi-	cation)
For further information c	oncerning this matter, please c	all:	
Adam L. Tucker		904 829-7039 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$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 Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration Sect	tion
Division of C		Division of Corp	
P.O. Box 632	.7	The Centre of Ta	illahassee
Tallahassee, I	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Intrepid Law LLC		2 s.	27 7 10:12
(Name of the Limi	ted Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)	
The Articles of Organization for this Limited L	iability Company were filed on	3/20/2017	and assigned
Florida document number L17000063416	_ <del></del> ·		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability company	here:	
Intrepid Law PLLC			
he new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if appli-	cable:		
Principal office address MUST BE A STREE		<del></del>	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	BOX)	•	
B. If amending the registered agent and/or agent and/or the new registered office addre		r records, <u>enter th</u>	e name of the new registere
<u> </u>			
Name of New Registered Agent:	Adam L. Tucker	··	
New Registered Office Address:	10752 Deerwood Park Blvd Su	ite 100	
	Enter I	Florida street address	
	Jacksonville	, Flori	da 32256
	City	<del>,</del>	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 ≠ `Månager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Adam L. Tucker	10752 Deerwood Park Blvd Suite 100	<b>=</b> Add
		Jacksonville, Florida 32256	□Remove
			□ Change
MGR	Tucker Living Trust dtd 1/21/2020	10752 Deerwood Park Blvd Suite 100	□Add
		Jacksonville, Florida 32256	Remove
			□Add
			□Remove
			⊡Change
<del></del>			
		· .	□ Remove
			□Add
			□Remove
			Change
	<del></del>		
			Remove
			□Change

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fective date, if other than the d	ate of filing:		(optional)	
fective date, if other than the d in effective date is listed, the date must b	e specific and cannot be prior	to date of filing or more t	than 90 days after filing.) Pursu	ant to 605.020
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same on soit and days of street, a	lata had mad an afficient	ima at 12:01 a.m. an t	harmanlism of the Tha Outs	dougn flore the
ecord specifies a delayed effective of is filed.	iate, but not an effective t	ime, ai 12:01 a.m. on u	ne earner or: (b) The 90th	day after the
, August 24	2020			
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red	, 2020 gnature of a member or auth	orized representative of a	member	