L17000126426

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Document Number)

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17 SEP 20 AM 8:19

SEP 21 2017

PULLER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EASY RIDER DISPATCH LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment are being submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL PFISTNER
(Name of Person)

EASY RIDER DISPATCH LLC
(Firm/Company)

6402 SUNSET AVENUE
(Address)

PANAMA CITY BEACH, FL 32408
(City/State and Zip Code)

MIKEPFIS@GMAIL.COM
(Email address may be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL PFISTNER at (850) 319-3261
(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

EASY RIDER DISPATCH 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: 06-08-2017 and assigned Florida document number 160300138561.

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:
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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2017 SEP 20 PM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: MICHAEL PFISTNER

New Registered Office Address: 6402 SUNSET AVENUE
Enter Florida street address

PANAMA CITY BEACH, Florida 32408
City *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.

X
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

Title	Name	Address	Type of Action
	ALISSA DEMATTEI	6202 SUNSET AVE, PANAMA CITY BEACH, FL 32408 PANAMA	☐ Add
			☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Add
			☐ Remove
			☐ Change

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TALLAHASSEE, FLORIDA

D. **If amending any other information,** enter change(s) here: *(attach additional sheets, if necessary)*

17 SEP 20 AM 8:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. **Effective date, if other than the date of filing:** _____ **(optional)**

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 Sept. 11, 2017

X _____
Signature of a member or authorized representative of a member

MICHAEL PFISTER
Typed or printed name of signee

Filing Fee: $25.00