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Office Use Only



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COVER LETTER

	Registration Sec Division of Corp							
CHDIE/	BARRACUDA TACKLE, LLC. T:							
SUBJEC	.1:	Name of Limited Liability Company						
The enclo	osed Articles of A	Amendment and fee(s) are sub-	mitted for filing.					
Please re	turn all correspor	idence concerning this matter	to the following:					
		HOWARD P. ROSS ESC	Q., B.C.S. BUSINESS LIT AND C	IVIL TRIAL				
			Name of Person					
		BATTAGLIA, ROSS, DIC						
	Firm/Company 5858 CENTRAL AVENUE, SUITE A Address ST. PETERSBURG, FL 33707							
		City/State and Zip Code hross@brdwlaw						
		E-mail address: (t	to be used for future annual report notific	cation)				
For furth	er information co	ncerning this matter, please ca	all:					
HOWARD P. ROSS, ESQ.,B.C.S			727 381-2300					
	Name of	Person	Area Code Daytime	Telephone Number				
Enclosed	is a check for the	e following amount:						
\$25.0	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

ars on our records.) OULY 24, 2017 and assi	
ULY 24, 2017 and assi	
	gned
<u>here</u> :	
e designation "LLC" or the abbreviation "L.I	C."
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on our records, enter the name	of the 1
lorida street address	
, Florida	•
	on our records, enter the name of

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>	Type of Action
MGR	JEFF GIGIANTE	3313 W. MULLEN AVE	
			□ Add
		TANPA, FL 33609	
			■ Remove
			□ Change
MGR	PETER WINTERS	3319 W. DORCHESTER ST	
			Add
		TAMPA, FL 33611	_
			Remove
			5 . ci
	SCOTT B. GRAMLING	1149 41ST AVENUE NE	Change
MGR	SCOTT B. GRAWLING	1148 4131 AVENUE NE	Add
		ST. PETERSBURG, FL 33703	
			■ Remove
MCE	JEFF MARTIN	27807 SANTA ANITA BLVD	_
MGE 		<u> </u>	
		WESLEY CHAPPEL, FL 33544	
			■ Remove
			Change
	 		Add
			Remove
			G (1)
			Change
	-		
			□ Change

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ective date, if other than the date of filing:	(optional) of filing or more than 90 days after filing.) Pursuant to 605.0
te: If the date inserted in this block does not meet the applicable startment's effective date on the Department of State's records.	
anient s criteriae dute on the preparation of state s records.	
record specifies a delayed effective date, but not an e	ffective time, at 12:01 a.m. on the earlier
he 90th day after the record is filed.	
september 5th 2018	
ted	

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Typed or printed name of signee

Filing Fee: \$25.00