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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Making Tracks 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:
William C. Shoemake
Making Tracks LLC
2506 N. Roosevelt Blud
Key West FL 33040 City/State and Zip Code
E-mail address: to be used for future annual report notification)
For further information concerning this matter, please call:
Mary Beth Meyers at (305) 304-0933  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, 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

Making	a Tracks LLC		
(Name of the Limited Li (A Fi	ability Company as it now appears on our records.) orda Limited Liability Company)		
The Articles of Organization for this Limited Liabili		20 a	17 nd assigned
riorida document number 1 / / / / / / / / / / /	28.07.8		
This amendment is submitted to amend the following	g:		
A. If amending name, <u>enter the new name of the</u>	limited liability company here:		
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the	abbreviat	ion "L.L.C."
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET AI	DDRESS)		
	45-1-25-20		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	2		) (
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			Cer
B. If amending the registered agent and/or r registered agent and/or the new registered office	registered office address on our records, <u>ente</u> address here:	r the p	
		-	င်ာ
Name of New Registered Agent:			64
			<del></del>
New Registered Office Address:			·
	Enter Florida street address		
•	, Florida _		
	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.

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>	Name	Address	Type of Action
AMBR	Randy Renew	1607 Breatwood Dr Irving TX 75061	Add
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effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of the date inserted in this block does not meet the applicable statument's effective date on the Department of State's records.	(optional) filing or more than 90 days after filing.) Pursuant to 60 story filing requirements, this date will not be lis
ecord specifies a delayed effective date, but not an efforce 90th day after the record is filed.	ective time, at 12:01 a.m. on the earl
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Filing Fee: \$25.00