

L18000033736

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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Amend

NOV 11 2019
D CUSHING

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: STRIKE TEAM FLORIDA HOCKEY 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:

Robert Prior

Name of Person

Firm/Company

11370 U.S. HIGHWAY 1

Address

NORTH PALM BEACH, FL 33408

City/State and Zip Code

bprior1422@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Prior

Name of Person

at (315)

Area Code

323-1262

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 4, 2019

ROBERT PRIER
11370 US HIGHWAY 1
NORTH PALM BEACH, FL 33408

SUBJECT: TEAM FLORIDA HOCKEY LLC,
Ref. Number: L18000033736

We have received your document for TEAM FLORIDA HOCKEY 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):

You must submit the complete application. You are missing page 1 of 3.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 619A00022752

2019 HOD
11/4/19
3:37

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Team Florida Hauling 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 2/6/19 and assigned Florida document number L 18000 23736.

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)

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: _____

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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>AMBR</u>	<u>LORINDA PRIER</u>	<u>459 Suno Drive SW</u>	<input type="checkbox"/> Add
		<u>Reno, NV 89508</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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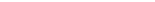
E. Effective date, if other than the date of filing: _____ (optional)

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) (optional)

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 DECEMBER 8. 2019



Signature of a member or authorized representative of a member

ROBERT PRIER

Typed or printed name of signee