LIS 000068890

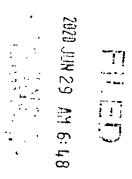
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AUG 1 1 2020 S. YOUNG

COVER LETTER

. . . .

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Cor	porations		
SUBJECT:	Trigger II, I	LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Wayne Gideons AMBR		
			Name of Person	**************************************
		Trigger It, LLC		
			Firm/Company	
		2953 Forrest Circle		
			Address	
		Seffner, Fl. 33584		
		 	City/State and Zip Code	
		waynegideons@gmail.com		
		E-mail address: (to be used for future annual report no	tification)
For further in	nfo rm ation c	oncerning this matter, please co	all:	
Wayne Gide	eons		813 453-1949 at ()	
	Name o	f Person		me Telephone Number
Enclosed is	a check for tl	ne following amount:		
□ \$25.00 I	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)
	iling Addres		Street Address:	oction
	gistration S vision of C	Section Corporations	Registration S Division of Co	
) Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ingger it, LLC					
(Name of the Limi	ted Liability Comps (A Florida Limited	iny as it now appears on our records Liability Company)	<u>s.</u>)		
The Articles of Organization for this Limited L	Liability Company	were filed on March 16, 2018	a	nd assig	gned
Florida document number L18000068890	<u> </u>			6	
This amendment is submitted to amend the following:				2020 JUN 29	• * ; * 1 • ;
A. If amending name, enter the new name of		29	4, m1		
<u> </u>			=	77	i ! .
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC"	" or the abbrevia	لمحل lion	C."
Enter new principal offices address, if appli	cable:	2953 Forest Circle		: 1,8	
Principal office address MUST BE A STREET ADDRESS)		Seffner, Fl. 33584			
nter new mailing address, if applicable:		2953 Forest Circle			<u>_</u>
Mailing address MAY BE A POST OFFICE	Seffner, Fl. 33584		-		
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records, <u>enter</u>	the name of t	he new	register
Name of New Registered Agent:					
New Registered Office Address:	2953 Forest Ci	rele			
		Enter Florida street address	s	-	
	Seffner	. Flo	orida <u>33584</u>		
		Civ	Ziı	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 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
			□Add
			□Remove
			Change
			□Remove
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Add
			Change
			□Add
			Remove
			□Change

	urposes shall not serve as a limitation on the powers or	abilities of this LLC,
which shall be permitted to e	engage in any and all lawfull business activities. If this I	.I.C intends to engage
in business activities outside	the State of its formation that require the qualification of	of the LLC in other States,
	tion before engaging in such out-of-state activities.	
		11 1
•		
	June 22, 2020	
Tective date, if other than the in effective date is listed, the date muster. If the date inserted in this blocument's effective date on the D	e date of filing:	(optional) 90 days after filing.) Pursuant to 605.0207 ements, this date will not be listed as (
	ve date, but not an effective time, at 12:01 a.m. on the ea	arlier of: (b) The 90th day after the
ecord specifies a delayed effective is filed. June 22.	ve date, but not an effective time, at 12:01 a.m. on the ea	arlier of: (b) The 90th day after the

. . .

Filing Fee: \$25.00