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Amend

MAR 2 6 2019

I ALBRITTON

COVER LETTER

Shore Ten	its and Events LLC		
, obolici	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Shawn Power		
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	Shore Tents and Events LI	.C	
		Firm/Company	
	2520 N Mcmullen Booth F	Rd STE B Suite B #210	
		Address	
	Clearwater, FL 33761		
		City/State and Zip Code	
	info@shoretentsandevents.c	com to be used for future annual report notif	ication)
For further information	concerning this matter, please ca	·	
Derek Mayo		213 292 1516 at()	
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**

2019/142.15 PH 2:56

Shore Tents and Events 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 Florida document number L18000073540		were med on	and assigned	
This amendment is submitted to amend the fo				
A. If amending name, enter the new name	of the limited liab	ility company here	:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desig	gnation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appl	icable:			
(Principal office address MUST BE A STREET ADDRESS)		2520 N Mcmullen Booth Rd STE B #210		
	_	Clearwater, FL 33761		
	E BOX)			
B. If amending the registered agent and registered agent and/or the new registered.	d/or registered o		ur records, <u>enter the name of the n</u>	
Name of New Registered Agent:	d/or registered of office address her Derek Mayo	<u>e</u> :		
registered agent and/or the new registered	d/or registered of office address her Derek Mayo	e: len booth rd ste b #21		
Name of New Registered Agent:	d/or registered of office address her Derek Mayo	e: len booth rd ste b #21	0	

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.

Il 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>	Address	Type of Action
MGR	Derek Mayo	2520 N Mcmullen Booth RD STE b #210 Clearwater, FL 33761	■ Add
			Remove
			Change
			Add
			□ Remove
			Change
			
			□ Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			□ Change
			Remove

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ffecti	ve date if other tha	n the date of filing	a+		(antion	al)
Note:	ective date is listed, the da If the date inserted in t ent's effective date on	his block does not n	neet the applical	o date of filing or mo ble statutory filing	re than 90 days after fil requirements, this d	al) ing.) Pursuant to 605.0207 ate will not be listed as
e rec The	ord specifies a del 90th day after the	ayed effective de record is filed.	late, but not	an effective ti	me, at 12:01 a.r	n. on the earlier of
Dated _	March 9th		2019			
-accu _						
		Tank	HHI	ized representative of		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00