48000105941

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COVER LETTER

TO:	Registration Sec Division of Corp							
CUDIE	Outdoor Wi	th It LLC						
Name of Limited Liability Company								
The en	closed Articles of i	Amendment and fee(s) are subr	nitted for filing.					
Please	return all correspoi	ndence concerning this matter t	to the following:					
		Randall J. Geraghty						
			Name of Person	·				
		Outdoor With It LLC						
		•	Firm/Company					
		650 Lake Harney Road						
			Address					
		Geneva, FL 32732						
		outdoor rithit@amail.com	City/State and Zip Code					
		outdoorwithit@gmail.com E-mail address: (t	o be used for future annual report notific	ation)				
For fur	ther information co	oncerning this matter, please ca	II:					
Randa	ll J. Geraghty		321 303-2045 at ()					
	Name of	Person	Area Code Daytime T	Felephone Number				
Enclose	ed is a check for th	e following amount:						
)ं च ् \$ 25	5.00 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

Outdoor With It 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 $\frac{05/01/2018}{}$ _____ and assigned Florida document number L18000105941 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

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	Elizabeth (Folsom) Geraghty	650 Lk Harney Rd Geneva FL 327.	⊒ Add
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			Change
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			☐ Change
	<u> </u>		Add
			☐ Remove
		 -	Change
			
			□ Remove
			Change
			Add
			☐ Remove
			Change
			□ Remove
			☐ Change

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Typed or printed name of signee

Filing Fee: \$25.00