18000310866

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(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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T. MATTHEWS NOV - 9 2021

COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
eudiezw.	REEL MEN	N. LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		C/O Rodney Villazor		
			Name of Person	
		Smith Villazor LLP		
			Firm/Company	
		250 West 55th St 30th Flo	or	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
			Address	
		New York NY 10019		
			City/State and Zip Code	
		josh@ogslawllc.com	to be used for future annual report noti	fication)
For further in	nformation c	oncerning this matter, please c		
. 1	,	, ,		
Volhan		n.ck	at (984) 969- Area Code Daytim	5776
·	Name o	f Person	Area Code Daytim	c Telephone Number
Enclosed is a	a check for th	ne following amount:		
■ \$25.00 f	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
	iling Addres		Street Address: Registration Se	ction
	-	Corporations	Division of Cor	
	D. Box 632		The Centre of T	
I a.	llahassee, l	FL 32314	2415 N. Monro	e Succi, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REEL MEN, LLC

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(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 Cor Florida document number L18000210866	mpany were filed on 09/04/2018	and assigned
Florida document number	-•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	ESS)	
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, <u>enter (</u>	the name of the new registere
agent and/or the new registered office address here:		
Name of Nau Bagistared Avents		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter r tortaa street taaress	
		rida
	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

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<u>Title</u>	<u>Name</u>	Address 21 KG" - 1 PH 12: 23	Type of Action
MGR	GoBit LLC	250 West 55th St	≣Add
		30th Floor	□Remove
		New York, NY 10019	□Change
MGR	Nathan Klutznick	1500 E Atlantic Blvd	□Add
		Pompano Beach, FL 33060	Remove
			□Change
			□Add
			Remove
			Change
			🗆 Add
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				<u>-</u>
Effective date, if other	than the date of filing:	not be prior to date of filing or n	ore than 90 days after file	al) ing.) Pursuant to 605.0207
Note: If the date inserted	I in this block does not meet e on the Department of State	the applicable statutory filir	g requirements, this d	ate will not be listed as
d is filed.		effective time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
Dated Oct	28th,	<u> 2021</u> .		
			e of a member	
	70 0	Ped or printed name of signee		

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