

LIB000230618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

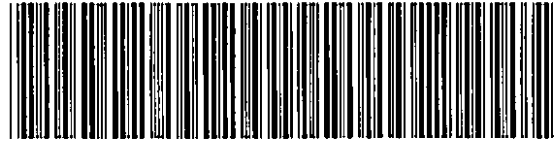
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Preferred Gun Training, 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:

Jason E. Murdock

\_\_\_\_\_  
Name of Person

Preferred Gun Training, LLC

\_\_\_\_\_  
Firm/Company

866 Duck Cove Path

\_\_\_\_\_  
Address

Inverness, Fl. 34453

\_\_\_\_\_  
City/State and Zip Code

preferredguntraining@gmail.com

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

For further information concerning this matter, please call:

Jason E. Murdock

352

817-5438

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**

Preferred Gun Training, 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 09/28/2018 and assigned  
Florida document number L18000230618.

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)**

Preferred Gun Training, LLC

866 Duck Cove Path

Inverness, Fl. 34453

**Enter new mailing address, if applicable:**  
**(Mailing address MAY BE A POST OFFICE BOX)**

Preferred Gun Training, LLC

866 Duck Cove Path

Inverness, Fl. 34453

**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: Jason E. Murdock

New Registered Office Address: 866 Duck Cove Path

*Enter Florida street address*

Inverness, Florida 34453

*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

| <u>Title</u> | <u>Name</u>       | <u>Address</u>      | <u>Type of Action</u>                      |
|--------------|-------------------|---------------------|--|
| AR           | Kathryn Boatright | 5214 SE 113th Place | <input type="checkbox"/> Add               |
|              |                   | Bellevue, FL 34420  | <input checked="" type="checkbox"/> Remove |
|              |                   |                     | <input type="checkbox"/> Change            |
| AR           | Ashley Murdock    | 866 Duck Cove Path  | <input checked="" type="checkbox"/> Add    |
|              |                   | Inverness, FL 34453 | <input type="checkbox"/> Remove            |
|              |                   |                     | <input type="checkbox"/> Change            |
|              |                   |                     | <input type="checkbox"/> Add               |
|              |                   |                     | <input type="checkbox"/> Remove            |
|              |                   |                     | <input type="checkbox"/> Change            |
|              |                   |                     | <input type="checkbox"/> Add               |
|              |                   |                     | <input type="checkbox"/> Remove            |
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|              |                   |                     | <input type="checkbox"/> Add               |
|              |                   |                     | <input type="checkbox"/> Remove            |
|              |                   |                     | <input type="checkbox"/> Change            |

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**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.

Dated November 2nd, 2018

Jason E. Murdock

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Typed or printed name of signee