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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	= #)
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(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	

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COVER LETTER

TO: Registration Se Division of Cor					
* Angel Lake SUBJECT:	Investments, LLC.	ŕ			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Tammy Toalson				
		Name of Person			
		Firm/Company			
	8430 Kingswood Rd	•			
		Address			
	Panama City, FL 32409				•
	ttoalson@mac.com	City/State and Zip Code		2019 JA	77
	E-mail address: (to be used for future annual report notific	ation)	AH 2	The same
For further information co	oncerning this matter, please ca	all:			
Name of	Person	at (<u>\$50</u>) <u>866-8</u> Area Code Daytime T	5758 Telephone Number		ري ز ا
Enclosed is a check for th	e following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	

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

Angel Lake Investments, LLC.		1
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) .tability Company)	Ī
The Articles of Organization for this Limited Liability Company Florida document number 100323277841	were filed on 1/14/2019 an	d assigned
This amendment is submitted to amend the following:		
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 Liabil	lity Company," the designation "LLC" or the abbreviation	on '[L,L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		
Enter new mailing address, if applicable:	8430 Kingswood Rd	
Mailing address MAY BE A POST OFFICE BOX)	Panama City, FL 32409	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		
New Registered Office Address:	- 148 第54 - 174	
	Enter Florida street address 103	228
	City Zip C	Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as poing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familia provided for in Chapter 605, F.S. Or, if this	r with and document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

MGR = N AMBR = A	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Tammy Toalson	8430 Kingswood Rd	⊟ Add
		Panana City, FL 32409	
			Remove
	Richard Toalson	8430 Kingswood Rd	Ch a nge
AMBR			
		Panama City, FL 32409	Remove
			Change
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		3/
te: If the date inserted in this blooment's effective date on the Do	be specific and cannot be prior to date of filing or more ck does not meet the applicable statutory filing spartment of State's records. effective date, but not an effective tire	requirements, this date will not be listed as
he 90th day after the rec		
ed Dianne Walst	. 2019	
Diana Wash	,	
J'INNE VI	Signature of a member or authorized representative of	f a member
Dianna Walsh		L L

Page 3 of 3

Filing Fee: \$25.00