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COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Rising Comet Name of Lim	Enetrorise LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	3 <u>.</u>
	Richard	1 T. Yerger Name of Person	
	Rising	Comet Eneterpr	ise UC
	6371_Pin	nested Oc. A	t.1316
		City/State and Zip Code 334	
	Rising or	metenenter or se k to be used for future andual report noti	Ignail Com
For further information	concerning this matter, please ca	all:	
Richard Name	1. Yercer of Person	at (<u>954</u>) <u>75 %</u> Area Code Daytim	4033 e Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	₩ 830.00 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

Rising Come E	neterpise LLC	records)
(A Florida Li	imited Liability Company)	
The Articles of Organization for this Limited Liability Con	npany were filed on <u>March</u>	1 /3 2 0/9 and assigned
Florida document number <u>4.79000.71553</u>	,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite Rising Cornet Enterors The new name must be distinguishable and contain the words "Limite"		
The new name must be distinguishable and contain the words. Limite	d 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	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe registered agent and/or the new registered office addre		ecords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
		Florida
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
		☐ Remove	
			Change
			
		□ Remove	
	.		Change
			Add
		□ Remove	
			Change
			Remove
			Change
		□ Remove	
			Change
			D Add
			□ Remove
			☐ Change

	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an Not	effective date, if other than the date of filing:
	record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of he 90th day after the record is filed.
Date	ed May 1st 2019.
	Signature of a member or authorized representative of a member
	Richard Tyerger Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00