

LI9000 119 094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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12/05/19--01024--002 **25.00

FILED
19 DEC -5 PM 4:50
JAN 10 2020

JAN 10 2020
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAD POPEYE ENTERPRISE, 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:

PETR SPURNY
Name of Person

MAD POPEYE ENTERPRISE, LLC
Firm/Company

12332 MONARCH CR.
Address

SEMINOLE, FL. 33772
City/State and Zip Code

PETR@HADPOPEYE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PETR SPURNY at (303) 249.3115
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**

MAD POPEYE ENTERPRISE, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
19 DEC -5 PM 4:50
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/01/2019 and assigned
Florida document number L19000119094.

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)

12332 MONARCH CIRCLE
SEMINOLE, FL 33772

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12332 MONARCH CIRCLE
SEMINOLE, FL 33772

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:

PETR SPURNY

New Registered Office Address:

12332 MONARCH CIRCLE

Enter Florida street address

SEMINOLE

City

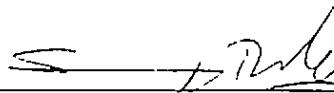
Florida

33772

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>
AMBR	PETR SPURNY	FL 33772 12332 MONARCH CR, SE7INOLF	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(b) The 90th day after the record is filed.

Dated 11/27/19, 2019

5/12/14

Signature of a member or authorized representative of a member

PETR SPURNY

Typed or printed name of signee