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COVER LETTER

TO:

Registration Section Division of Corporations

MAILING ADDRESS:

Registration Section
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

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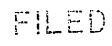
SUBJECT: Ballistics USA LLC	
Name of Limited Liability Company	_
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Reuben Boyd Name of Person	_
Ballistics USA LLC Firm/Company	. <u>. </u>
Firm/Company	
200 Ryans Ridge Ave	
Address	
Eustis FL 327746 City/State and Zip Code	
Femail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
\mathcal{D}	
Reuben Boyd at (407) 285-6116 Name of Person Area Code Daytime Telephone Num	-L
Area Code Daytine Telephone Nun	iner
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate of Status	Filing Fee, ficate of Status & fied Copy onal copy is enclosed)

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



2019 1.06 22 🏲 多44 Ballistics USA (Name of the Limited Liability Company as it now appears on our records.) Children (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{5/6/2v19}{}$ and assigned Florida document number 4-19000121714. 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) S. 35 .. 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: New Registered Office Address: Enter Florida street address , Florida

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

Title Name Address Type of Action

AMBR Suspended in 6100 250 Ryan's Ridge Auc BAdd

Eustis FL 32.726 D Remove

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		Eustis FL 32726	Remove
North			Change
AMBR	Kemibeth Marmulejos	250 Ryans Ridge AVE	Add
171.		Eusts FC 32726	Remove
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AMBR	Robert Boyd Sr	250 Ryans Ridge Ave	D Add
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Dated			·				
		Signature of a	D .				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00