## 1190001321404

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1 LC Amend,

IN 30 ZOB



July 5, 2019

SHANE A. LANTZ 1435 BAYSHORE DR. NICEVILLE, FL. 32578

SUBJECT: THRILL SEAKER, LLC Ref. Number: L19000132404

We have received your document and check(s) totaling \$30.00.) However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE ALL PAGES OF THE DOCUMENT AND RETURN FOR FILING.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 119A00013626

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Thrill Seaker, LLC.  Name of Limited Liability Company
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:
Shane A. LANTZ Name of Person
Thrill Seaker LLC Firm/Company
1435 Bay Shore DR Address
Niceville FL 32578  City/State and Zip Code  Shanelant 2 @msn. com  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shane LAUTZ at (303) 905/637
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  S55.00 Filing Fee & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## TO ARTICLES OF ORGANIZATION OF

Thrill Seaker, LLC

(Name of the Limited	<u>d Liability Comp</u> A Florida Limited	oany as it now appears on I Liability Company)	our records.)			
The Articles of Organization for this Limited Lia Florida document number	Articles of Organization for this Limited Liability Company were filed on $\frac{\text{May 16, 2019}}{\text{In May 16, 2019}}$ and assigned rida document number $\frac{\text{L19000132404}}{\text{L19000132404}}$ .					
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited lja	bility company here:				
The new name must be distinguishable and contain the wo	ords "Limited Lial	oility Company," the desig	nation "LLC" or the abbrevia	ation "L.L.C."		
Enter new principal offices address, if applicable:		NIA				
(Principal office address MUST BE A STREET	<u> ADDRESS)</u>		<u>-</u>	· ·		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B)  B. If amending the registered agent and/o registered agent and/or the new registered office Name of New Registered Agent:  New Registered Office Address:	or registered	office address on or		JUL 29 PM 15 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	<del></del> -	City	, Florida 	p Code		
New Registered Agent's Signature, if changing Re	egistered Agen	<u>t:</u>				
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this c	r and complet tered agent as egistered offic hange.	e performance of my provided for in Cha e address. I hereby c	duties, and I am famil pter 605, F.S. Or, if th	iar with and is document is liability		

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = A	uthorized Member		
Title	<u>Name</u>	Address	Type of Action
AMBL	Shanc A. Lantz	1435 Bayobore Dr.	Add
		Micwille, FL 32578	Remove
			Change
AMBR	Jammy L. Lantz	1435 Bayphor Dr.	
		Diceville, FL 32578	□ Remove
			Change
			□ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			🗆 Add
			🗆 Remove
			Change
			Add
			☐ Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>
E. Effective date, if other than the date of filing: 7-26-19 (optional)  (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)  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.
If the record specifies a delayed effective date, but not an effective time at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated July 26. 2019
Signature of a member or authorized terrestrative of a member  Hane H. Lawi Z
Typed or printed name of signee

Page 3 of 3

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Filing Fee: \$25.00