

L19000 147 530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

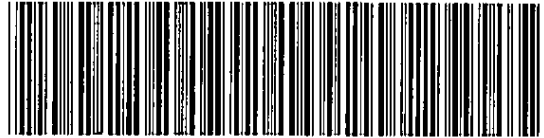
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2019 SEP 20 PM 12:01

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SEP 21 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2019

JUAN R. ANEZ BARAHONA
1017 NE 14TH ST
OCALA, FL 34470

SUBJECT: THE GLOCK SPOT LLC
Ref. Number: L19000147530

We have received your document for THE GLOCK SPOT LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C.," "LLC," or the words "LIMITED LIABILITY COMPANY." Please amend the name of your entity accordingly.

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.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 219A00016772

COVER LETTER

TO: Registration Section
Division of Corporations

/ Attention: Rebecca White

SUBJECT:

Slides And Barrels 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:

Donna Anez Barahona

Name of Person

Slides And Barrels LLC

Firm/Company

2352 NE 16th Ave

Address

Ocala FL 34470

City/State and Zip Code

slidesandbarrels@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donna Anez Barahona

Name of Person

at (561) 513-3953

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- Payment Submitted & Cashed 8-15-19 ck#0098

☐ \$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 32314STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

850-245-6897

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

The Glock Spot LLC

2019 SEP 20 PM 12:01

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 6-3-2019 and assigned
Florida document number L19000147530.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Slides And Barrels LLC

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)

2352 NE 16th Ave
Ocala FL 34470

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2352 NE 16th Ave
Ocala FL 34470

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

City, Florida 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>
MGR	Juan Anez Barahona	2352 NE 16 th Ave Ocala FL 34401	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (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)(b)

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 September 17, 2019

August Barakona

Signature of a member or authorized representative of a member

Signature of a member or authorized representative
Donna Anez Barahona

Typed or printed name of signee