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CALLASSEE, FLORIDE

AUG 1 0 2019 S. YOUNG

COVER LETTER

TO:	Registration Se Division of Cor						
er:b t	A & S Arm	ory, LLC					
SUBJECT:Name of Limited Liability Company							
The er	iclosed Articles of	Amendment and fee(s) are sub-	mitted for tiling.				
Please	return all correspo	ondence concerning this matter	to the following:				
		Ralph Steven Flanary					
		A & S Armory, LLC	Name of Person				
		7004 Cupseed Lane	Firm/Company				
		Harmony, FL., 34773	Address				
		asarmory@yahoo.com	City/State and Zip Code				
		E-mail address: ()	to be used for future annual report notif	ication)			
For fu	rther information e	oncerning this matter, please ea	ill:				
Ralph	Flanary		at () 488-7210 Area Code Daytime				
	Name o	f Person	Area Code Daytime	: Telephone Number			
Enclos	sed is a check for th	ne following amount:					
■ \$2	5.00 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:

TO:

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

A & S Armory, LLC	
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compan	y were filed on 07/05/2019 and assigned
lorida document number L19000174776	
this amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
the new name must be distinguishable and contain the words "Limited Liab	bility 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)	
Enter new mailing address, if applicable:	Man or M
Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
	ķ™ on
3. If amending the registered agent and/or registered of	
egistered agent and/or the new registered office address he	<u>:re</u> :
N CN D CA LA	
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, 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>	Type of Action
AR	Alex Von-Wernich	3315 Schoolhouse Road	☐ Add
		Harmony, FL., 34773	Li Add
			■ Remove
			□ Change
AR	Ralph Steven Flanary	7004 Cupseed Lane	
		Harmony, FL., 34773	
			□ Remove
			☐ Change
			□ Remove
		 	☐ Change
			☐ Remove
			☐ Change
			
			□ Remove
			☐ Change
			☐ Remove
			Change

	tion, enter change(s) here: (Attach additional sheets	
•		
fective date, if other than the in effective date is listed, the date must be: If the date inserted in this blocument's effective date on the D	t be specific and cannot be prior to date of filing or more than 90 cock does not meet the applicable statutory filing requirements	(optional) days after filing.) Pursuant to 605.0. ents, this date will not be listed
record specifies a delayed The 90th day after the rec	i effective date, but not an effective time, at 1 ord is filed.	2:01 a.m. on the earlier
ted August 01	2019	
	Signature of a member antiborized representative of a membe	г

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Filing Fee: \$25.00