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COVER LETTER

SUR IFC"		FISHING LLC				
OODOIT.	••	Name of Lim	ited Liability Company			
		TRAVIS THOMPSON				
			Name of Person			
			Firm/Company			
FREEDOM FISHING 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: TRAVIS THOMPSON Name of Person Firms/Company 900 Penn Trail Address: Jupiter, FL 33458 City/State and Zip Code tthompsondmd@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Travis Thompson Name of Person Name of Person Trail 628-2551 Area Code Daytime Telephone Number Enclosed is a check for the following amount:						
		hunitan EL 22459	Address			
		Jupiter, FL 33438	City/State and Zin Code			
		•				
Preserve to the enclosed Articles of Amendment and fee(s) are submitted. The enclosed Articles of Amendment and fee(s) are submitted. Please return all correspondence concerning this matter to the TRAVIS THOMPSON Property	to be used for future annual report notific	eation)				
For furthe	er information co	oncerning this matter, please co	all:		2022	
Travis Th	nompson		•			
	Name of	Person		Telephone Number		*\$0
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¾ \$25.0	0 Filing Fee		Certified Copy	Certificate Certified C	ng Fee; (1) ———————————————————————————————————	
,	Mailing Address	•	Street Address			

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Rate /ED

2022 JUN 13 PM 12: 13

Letter Number: 622A00001916

FLORIDA DEPARTMENT OF STATE Division of Corporations

STATE E.FL

January 25, 2022

TRAVIS THOMPSON 900 PENN TRAIL JUPITER, FL 33458

SUBJECT: FREEDOM FISHING LLC

Ref. Number: L19000179964

We have received your document for FREEDOM FISHING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU SUBMITTED TWO DIFFERENT DOCUMENTS... PLEASE PUT INFORMATION ON THE AMENDMENT FORM.

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

Alecia Rivers Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FREEDOM FISHING LLC

company has been notified in writing of this change.

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

(A Piorida Limited)	Liaotiny Company)	2.	
The Articles of Organization for this Limited Liability Company	were filed on	and assigned.	
Florida document number L19000179964			
This amendment is submitted to amend the following:		, ,,,	
A. If amending name, enter the new name of the limited liah	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	on "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	900 Penn Trail		
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."			
	000 B		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	Jupiter, FL 33458		
	address on our records	enter the name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida stree	et address	
	, Florida		
	Cùy	Zip Coxle	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	performance of my du	ties, and I am familiar with and	

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SCOTT E MEIER	500 UNIVERSITY BLVE #112	□Add
		JUPITER, FL 33458	■Remove
			Change
			🗆 Add
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in ett <u>ote:</u>	ive date, if other than the date of filing:
ecor is fi	rd 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 led.
ıted	27Dce 2021
	Signature of a member of authorized representative of a member

Filing Fee: \$25.00