## L19000195332

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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

TO:

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CHID IE CYT		imited, LLC.		
SUBJECT	•	Name of Lin	nited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	Code  Innual report notification)  5663109  Daytime Telephone Number  Daytime Telephone Number  See A Securificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)  Seet Address:  gistration Section vision of Corporations e Centre of Tallahassee
Please retu	rn all correspo	ondence concerning this matter	to the following:	
		Jason Turner		
			Name of Person	
		Turner Unlimited, LLC.		
		<del></del>	Firm/Company	
		801 Red Fern Road		
			Address	
		Havana, Florida 32333		
			City/State and Zip Code	
			·	tification)
For further	information c	oncerning this matter, please c	all:	
Jason Turn	ier		and the second s	
,	Name o	f Person		ne Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
Re D	ailing Addressegistration Sivision of CO. Box 632	Section orporations	Division of Co	rporations
	allahassee, F	Name of Person  Turner Unlimited, LLC.  Firm/Company  801 Red Fern Road  Address  Havana, Florida 32333  City/State and Zip Code  jason.turner1982@gmail.com  E-mail address: (to be used for future annual report notification)  oncerning this matter, please call:  at (		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Turner Unlimited, LLC. (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 7-31-19 Florida document number \_\_\_\_L19000195332 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." 4864 Turner Road Perry, Florida 32348 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 4864 Turner Road Perry, Florida 32348 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

## 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.

City

, Florida \_

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
President	Joseph Abel Turner	4864 Turner Road Perry, Florida 32348	<b>=</b> Add
			□ Remove
			□Change
VP	Heather Turner	801 Red Fern Road Havana, Florida 32333	≣Add
			□Remove
<del></del>			□ Add
		<del> </del>	□Remove
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Effective date, if other than the date of filing:  (optional)  (optional)  (optional)  (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.   (obeg: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to locument's effective date on the Department of State's records.  (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 dis filed.  (April 3rd  2020  Signature of a member or authorized representative of a member  Jason Turner, President									
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