

1/9/2020

Division of Corporations

Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GOLD WINGNUT PRODUCTIONS LLC

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOLD WINGNUT PRODUCTIONS 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:

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N Brand Blvd 11th Fl

Address

Glendale, CA 91203

City/State and Zip Code

don@goldwingnut.com

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

For further information concerning this matter, please call:

Cheyenne Moseley

800

773-0888

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

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☐ \$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 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

GOLD WINGNUT PRODUCTIONS 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 08/19/2019 and assigned Florida document number L19000211039.

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3503 Vail Ct.

The Villages, Florida 32163

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3503 Vail Ct.

The Villages, Florida 32163

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	VERNON J EDWARDS		<input type="checkbox"/> Add
		5756 BARNES THE VILLAGES, FL 32163	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	VERNON J EDWARDS		<input type="checkbox"/> Add
		5756 BARNES THE VILLAGES, FL 32163	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BRENDA L EDWARDS		<input type="checkbox"/> Add
		5756 BARNES THE VILLAGES, FL 32163	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Donald Lee Wiley Jr.		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		3503 Vail Ct. The Villages, Florida 32163	<input checked="" type="checkbox"/> Change
MGR	Donald Lee Wiley Jr		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		3503 Vail Ct. The Villages, Florida 32163	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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.

Dated 12/27, 2019

Signature of a member or authorized representative of a member

Typed or printed name of signee