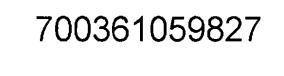
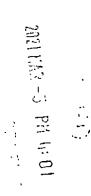
## 119000215891

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

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Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

ISARA TU	JRF LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ISARA SATRAROJ		
		Name of Person	
	ISARA TURF LLC		
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	308 SUGAR CREEK DR		
		Address	<del></del>
	PLANT CITY, FL 33563		
	<del></del>	City/State and Zip Code	
	rockyoctopusseller@gmail.		
For further information c	e-mail address: (	to be used for future annual report noti	fication)
	oncerning this matter, prease of		
ISARA SATRAROJ		813 484-9607 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ISARA TURF LLC			
(Name of the Lin	ited Liability Co (A Florida Limi	mpany as it now appears on our reco ted Liability Company)	rds.)
The Articles of Organization for this Limited	Liability Comp	any were filed on 08/23/2019	and assigned
lorida document number L19000215891	·		
his amendment is submitted to amend the fo	llowing:		
. If amending name, enter the new name	of the limited l	liability company here:	
Rocky Octopus LLC			
he new name must be distinguishable and contain the	words "Limited L	iability Company," the designation "LI	LC" or the abbreviation "L,L,C,"
Enter new principal offices address, if appl	icable:	Same	
Principal office address MUST BE A STRE		- <del></del>	
THICIPAL OFFICE MAGNESS MOST BE A STRE	<u>E I ADDRESS</u>	2	
		C	
Enter new mailing address, if applicable:		Same	. 2
(Mailing address MAY BE A POST OFFICE BOX)			202
			unit in the second seco
			1
3. If amending the registered agent and/or	registered offi	ice address on our records, ente	
gent and/or the new registered office addr	ess here:		
Name of New Registered Agent:	Same		
New Registered Office Address:			
<del>-</del>		Enter Florida street addr	ess
		ī	Florida
	·	City	Zin 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>	Name	Address	Type of Action
	Same		
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Effectiv f an effec	e date, if other than the date of filing: (optional) tive 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
<u> Note:</u> 11	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
documer	nt's effective date on the Department of State's records.
rocord	specified a delegand offenting data has not an effective time. I 2 01
rd is file	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 d.
Dated_	March 1st 2021
	_ Jan sal ray
	Signature of a member or authorized representative of a member