## 119000292834

(Requestor's Name)			
(Address)			
(Address)			
(Ĉity/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





700339554967

63/10/29-+01013-+003 \*\*25.00

PILED

2020 FEB 10 PH 5: 16

SECRETARIES SECURIOS DE

MAR () 4 ZOZU I ALBRITTON

## **COVER LETTER**

10: Registration Sc Division of Cor				
Bita Armar SUBJECT:	ments LLC			
SOBJEX, U.	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	united for tiling		
	ondence concerning this matter			
racase return an correspo	indefice concerning this matter	to the following.		
	Jason Prather			
		Name of Person		
	Bita Armaments			
		Firm/Company		
	163 County Rd 75			
		Address		
	Bunnell, FL 32110			
		City/State and Zip Code		
	bitaarmament@gmail.com		· · ·	
		to be used for future annual report no	(dication)	
For further information c	concerning this matter, please c	au:		
Jason Prather		386 338-4047 at ()		
Name o	of Person	Area Code Daytu	ne Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 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:		<u>Street Address:</u> Registration Se	ection	
Registration Section Division of Corporations		Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bita Armament LLC	
( <u>Name of the Limited Liability Company as</u> (A Florida Limited Liabili	it now appears on our records.)  ly Company)
The Articles of Organization for this Limited Liability Company were	filed on 01/01/2020 and assigned
lorida document number £19000292834	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability o	company here:
he new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	2020 1,411
	70 71
nter new mailing address, if applicable:	5 T
Mailing address MAY BE A POST OFFICE BOX)	- T -1
	ii vi
	5 <b>6</b>
. If amending the registered agent and/or registered office addre	ess on our records, <u>enter the name of the new regist</u>
gent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida

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.

Cuv

Zip Code

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

Title	Name	Address	Type of Action
AMBR	Jason Prather	163 County Rd 75	■Add
		Bunnell, FL 32110	
			□Change
		<del></del>	□Add
			⊏Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			TChange
			□Remove
			□Change
			□Add
			□Remove
			©Change

## Page 2 of 3

_	
_	
_	<del></del>
-	
_	
	<del>_</del>
_	
_	
_	
_	
_	
_	
_	
_	
Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	
	Signature of a member or authorized representative of a member
	Megan Prother
	Typed or printed name of signee