## 119000297245

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

Office Use Only



300391640143

CALL CO - COCIO--035 \*\*15.6.



## **COVER LETTER**

	Registration Se Division of Cor		,	
eun ir co	Lag Shot, L	LC	u	
SUBJECT	· :	Name of Lim	nited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please reti	ım all correspo	ndence concerning this matter	to the following:	
		Gary Guerrero		
			Name of Person	
		Lag Shot, LLC		
			Firm/Company	
		2212 Vardin Place		
		<del></del>	Address	<del></del>
		Naples, FL, 34120		
		<del></del>	City/State and Zip Code	
		rinay@wondertax.com	to be used for future annual report notifi	(
For further	r information c	oncerning this matter, please c	•	cation)
Rinay Del	Pizzo		239- 405-8395 at ()	
Name of Person				Telephone Number
Enclosed i	s a check for th	ne following amount:		
<b>■ \$25.0</b> 0	) 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)
R D P	Iailing Addres Registration Solivision of Co. Box 632 Callahassee, F	Section orporations 7	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	oorations allahassee Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Lag Shot, LLC

2022 JUL 27 AH 8: 36

Liability Company)  12/05/2019	
y were filed on $\frac{12/05/2019}{}$ and assigned	
bility company here:	
ility Company," the designation "LLC" or the abbreviation "L.L.C."	
2025 Seward Ave. #100	
Naples, FL, 34109	
2025 Seward Ave. #100	
Naples, FL, 34109	
address on our records, enter the name of the new register	
, Florida City Zip Code	
<u>:</u>	
ree to act in this capacity. I further agree to comply with t e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is e 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, 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>	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
		<del></del>	□Change
			□Add
			□Remove
			Change
		<del></del>	□Add
			□Remove
			□Change
<del></del>		<del>_</del>	□Add
			□ Remove
			□Change
<del></del>			□Add
			[]Change

			··ica ,	<del></del>
<del></del>			•	
				<del></del>
		····		
		·	· ·	
<del></del> -				
-				S 15
~·				2022 JUL 27 SHURW TAN TALL AHI
		<del></del>	·	
				SS. A
				SSEE FEE
				36
				. <u> </u>
·-·			<del></del>	<del> </del>
			<del>,, , , , , , , , , , , , , , , , , , ,</del>	
f an effective date: Note: If the date	miscreed in this plot	be specific and cannot be prior	to date of filing or more than 90 day	(optional) ys after filing.) Pursuant to 605,0207 (3) its, this date will not be listed as the
locument s effec	nive date on the Dep	partment of State's records.		
record specifies d is filed.	a delayed effective	date, but not an effective ti	me, at 12:01 s.m. on the earlier	of: (b) The 90th day after the
July 26th		2022	<u> </u>	
		6.		
		1 Jane		

Filing Fee: \$25.00