

L19000301212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

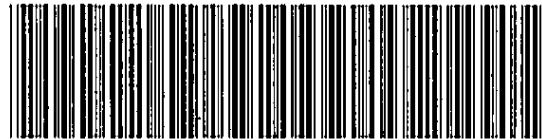
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MAR 09 2020

03/10/20 10:41:45

O SIMMONS

MAR 08 2021



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2021 MAY 10 AM 10:16

SECRETARY OF STATE  
TALLAHASSEE, FL

April 28, 2021

MARK WELLS 2ND ATTEMPT  
24204 JENNINGS RD  
MYAKKA CITY, FL 34251

SUBJECT: SAWDUST FANATIC LLC  
Ref. Number: L19000301212

You failed to make the correction(s) requested in our previous letter.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 621A00008844



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 8, 2021

MARK WELLS  
8955 US HWY 301  
#220  
PARRISH, FL 34219

SUBJECT: SAWDUST FANATIC LLC  
Ref. Number: L19000301212

We have received your document for SAWDUST FANATIC LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 121A00004900

2021 MAR 18 PM 5:29

RECEIVED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2020 MAR 26 PM 12:11

March 26, 2020

MARK WELLS  
8955 US HWY 301  
#220  
PARISH, FL 34219

SUBJECT: SAWDUST FANATIC LLC  
Ref. Number: L19000301212

We have received your document for SAWDUST FANATIC LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 120A00006717

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

2021 MAY 10 AM 6:46

SAW DUST FANATIC 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 3-4-2020 and assigned  
Florida document number L19000301212.

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)

24204 JENNINGS RD.  
MYAKKA CITY, FL 34251

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:

~~8455 US HWY 301 N #220~~  
~~PARISH~~ Florida ~~34214~~  
~~City~~ ~~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.*

[Signature]  
If Changing Registered Agent, Signature of New Registered Agent



D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2021 MAY 10 AM 6:46

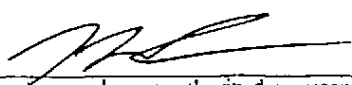
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If 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 (3)(b)

**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.

If the 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 record is filed.

Dated 08 MAY 4<sup>TH</sup> 2021.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

MARK L. WELLS

\_\_\_\_\_  
Typed or printed name of signee