

120000059414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

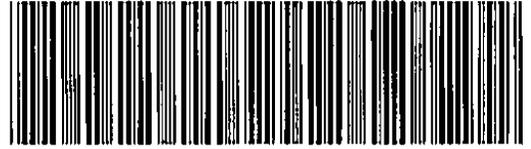
(Business Entity Name)

(Document Number)

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06/25/20--01015--017 \*\*

SECRETAR / OF STATE  
TALLAHASSEE, FL

D. BRUCE  
AUG 11 2020

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: CRT OUTFITTERS 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:

**JOEL FRIEND**  
Name of Person

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**JOEL FRIEND AND ASSOCIATES, INC.**  
Firm/Company

---

**2863 EXECUTIVE PARK DRIVE, STE. 105**  
Address

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**WESTON, FLORIDA 33331**  
City/State and Zip Code

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**JOEL@JOELFRIEND.COM**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**JOEL FRIEND** at ( **954** ) **704-1040**  
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
- \$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:**  
 Registration Section  
 Division of Corporations  
 P.O. Box 6327  
 Tallahassee, FL 32314

**Street Address:**  
 Registration Section  
 Division of Corporations  
 The Centre of Tallahassee  
 2415 N. Monroe Street, Suite 810  
 Tallahassee, FL 32303

2020 JUN 29 PM 5:17  
 SECRETARY OF STATE  
 TALLAHASSEE, FL

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

CRT OUTFITTERS 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 02/21/2020 and as  
Florida document number L20000059414.

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 "

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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 agent and/or the new registered office address here:**

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida

*City*

SECRETARY OFFICE  
TALLAHASSEE  
FEB 29 PM 5:11

**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. 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 or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>             | <u>Address</u>                    | <u>Type of</u>                         |
|--------------|-------------------------|-----------------------------------|--|
| MGR          | RV DAWGS LLC            | 7378 W ATLANTIC BLVD STE 382      | <input type="checkbox"/> Ac            |
|              |                         | MARGATE, FL 33063                 | <input checked="" type="checkbox"/> Re |
|              |                         |                                   | <input type="checkbox"/> Cl            |
| MGR          | RV AIRBNB LLC           | 4613 N UNIVERSITY DRIVE STE 226   | <input type="checkbox"/> Ac            |
|              |                         | CORAL SPRING, FL 33067            | <input checked="" type="checkbox"/> Re |
|              |                         |                                   | <input type="checkbox"/> Cl            |
| MGR          | CARAVAN ESCAPES RV LLC  | 7378 W ATLANTIC BLVD STE 382      | <input type="checkbox"/> Ac            |
|              |                         | MARGATE, FL 33063                 | <input checked="" type="checkbox"/> Re |
|              |                         |                                   | <input type="checkbox"/> Cl            |
| MGR          | CURTIS CAMERON          | 4613 N UNIVERSITY DRIVE SUITE 226 | <input type="checkbox"/> Ac            |
|              |                         | CORAL SPRINGS, FL 3306            | <input checked="" type="checkbox"/> Re |
|              |                         |                                   | <input type="checkbox"/> Cl            |
| MGR          | TAYLOR A. PATTERSON     | 7378 W ATLANTIC BLVD STE 382      | <input type="checkbox"/> Ac            |
|              |                         | MARGATE, FL 33063                 | <input checked="" type="checkbox"/> Re |
|              |                         |                                   | <input type="checkbox"/> Cl            |
| MGR          | RICHARD P. EMMERICH III | 7378 W ATLANTIC BLVD STE 382      | <input checked="" type="checkbox"/> Ac |
|              |                         | MARGATE, FL 33063                 | <input type="checkbox"/> Re            |
|              |                         |                                   | <input type="checkbox"/> Cl            |

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TALLAHASSEE, FL  
JUN 29 PM 5:17

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

Multiple horizontal lines for amending information.

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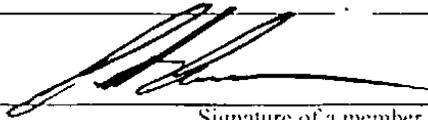
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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 60

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be 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 record is filed.

Dated         JUNE 26                 2020        



Signature of a member or authorized representative of a member

CURTIS CAMERON

Typed or printed name of signee