## 120000137575

(R	equestor's Name)	
(A	ddress)	<u> </u>
(A	ddress)	
(C	ity/State/Zip/Phone #	<i>f</i> )
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	)
(D	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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Name Change

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## **COVER LETTER**

TO:	_	ration S on of C	Section orporations	·	:	* • • • • • • • • • • • • • • • • • • •	
SUBJE	ECT:	Ryan Hu	gghins Enterprises LLC				
	_		Name of Foreig	n Limited Liab	ility Con	npany	
Dear Si	ir or M	adam:					
The end	closed	applicat	ion, certificate and fee(s)	are submitted	for filing.		
Please	return :	all corre	espondence concerning th	is matter to the	followin	g:	
Ryan H	ugghins						
			Name of Person		_		
			Firm/Company		_		
			Time Company			· c . Lu	ລຸ
2778 L	ucas Lal	ke Rd					პ ₹ე
			Address		_		∌ ~
Chipley	FL 324	128			_		onoo APR 21 Pit 4: 22
			City/State and Zip Code	e			<del>۱</del> : 2
rphuggs	s@hotm	ail.com				, (a).	2
E-ma	ail add	ress: (te	be used for future annual	l report notifica	tion)		
For fur	ther in	formatio	on concerning this matter,	please call:	)		
		Namo	of Person	Area Code	& Dayti	ime Telephone Number	
	Regis Divis P.O. I	ion of C Box 63:	Section Corporations		Division The Centre 2415 N	ddress: ation Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 ssee, FL 32303	
■\$25 CR2E05	Filing		check for the following ☐ \$30 Filing Fee & Certificate of Status	S55 Filing		☐ \$60 Filing Fee. Certificate of Status & Certified Copy	יב

RECEIVED

2022 APR 21 AM 7:58

SECRETALLY CONTATE TALLAHASSEE, FL

April 6, 2022

RYAN HUGGHINS 2778 LUCAS LAKE RD CHIPLEY, FL 32428

SUBJECT: RYAN HUGGHINS ENTERPRISES, LLC

Ref. Number: L20000137575

We have received your document for RYAN HUGGHINS ENTERPRISES, 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):

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Letter Number: 522A00007947

TERARRA A SIMMONS OPS

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



The Articles of Organization for this Limited Liab	hility Company were filed on <u>5/26/20</u>	and assigned
Florida document number L 2 0000 1375		
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
30A Shallow Water (	Guide Service LLC rds "Limited Liability Company," the designation "Li	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:	
(Principal office address MUST BE A STREET	(ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B)	O.X)	
B. If amending the registered agent and/or regagent and/or the new registered office address	·	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		·
	Enter Florida street eddr	V3.5
	1	Florida Zip Code
	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 tiled 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.

It Changing Register Regent, 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
			□Remove
			DChange
			□Add
			□Remove
			IChange
			□Add
			Remove
			□Change
<u>-</u>			□Add
			□Remove
			Change
			□Remove
			Z Change
			□ Remove
			⊇Change

. 11 411	tending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	·
	1
If an ef <u>Note:</u>	ive date, if other than the date of filing:
e reco rd is ti	ed 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 led.
Dated	
	Signature of the authorized representative
	Ryan Hugghins
	Typed or printed name of signee

Filing Fee: \$25.00