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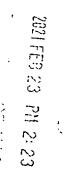
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

	Registration Se Division of Cor			
cuntro	Maelstrom	Events LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Maxwell Pitney Cac	·	<del></del>
			Name of Person	
		Maelstrom Events L	LC Firm/Company	
		608 Cohen Way		
		ood concil vvay	Address	
		Sarasota, FL 34236		
		board@maelstromev	City/State and Zip Code	
		E-mail address: (	to be used for future annual report no	tification)
For furth	er information c	oncerning this matter, please c	all:	
Maxwe	ell Pitney Ca	ceres Garrabrant	at ( <u>941</u> ) <u>321-002</u> Area Code	0
	Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed	is a check for th	ne following amount:		
<b>⊠</b> \$25.0	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 Addres		Street Address: Registration S	ection
	Registration S Division of C		Division of Co	
	P.O. Box 632 Tallahassee, I		The Centre of	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Maelstrom Events LLC			
(Name of the Lin	nited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	
e Articles of Organization for this Limited		16, 2020 and ass	signed
orida document number L20000206702	·		
is amendment is submitted to amend the fo	llowing:		
If amending name, enter the new name	of the limited liability company her	<u>re</u> :	
e new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "ELC" or the abbreviation "L	.L.C."
ter new principal offices address, if appl	icable:		
rincipal office address MUST BE A STRE	EET ADDRESS)		
nter new mailing address, if applicable:			
.,	E BOV		
failing address MAY BE A POST OFFICE	<u></u>		
	<del></del>	2	
If amending the registered agent and/or	ragistared office address on our re	cords, enter the name of the ne	w regis
ent and/or the new registered agent and/or	ress here:	ITI	
		. 23	•
Name of New Registered Agent:	Maxwell Pitney Caceres G		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	608 Cohen Way	<u>, , , , , , , , , , , , , , , , , , , </u>	ر۔
	Enter Flori	da street address . 2	
	Sarasota	Florida 34236	
	Citv	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.

Maxwell Garrabrant
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
MGR	Kristen Hagen	2488 Seminole Road Fort Pierce FL 34951	🗆 Add
			≣Remove
			□Change
MGR	John Drondoski	2488 Seminole Road Fort Pierce FL 34951	
			≣Remove
			□ Change
	<del></del>		
			[]Remove
			Change
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			□Change

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octi	ate, if other than the date of filing: (optional)
n effe <u>te:</u>	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 605.02 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a effective date on the Department of State's records.
ecore	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
ted_	ruary 9th, 2021
	Keaton T. Fraticelli
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00