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COVER LETTER

	tration Sec on of Corp					
	EFLEX O	UTDOOR SUPPLY AND EQ	UIPMENT LLC	•		
SUBJECT: _		Name of Lim	ited Liability Company			
The enclosed A	Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return al	ll correspor	ndence concerning this matter	to the following:			
		CHRISTISN GARCIA				
			Name of Person			
	REFLEX OUTDOOR SUPPLY AND EQUIPMENT LLC					
Firm/Company						
2319 SE MANITON TERRACE						
		Address PORT SAINT LUCIE, FL 34953				
			City/State and Zip Code			
		OUTDOORS@REFLEXW	AY.COM			
		E-mail address: (to be used for future annual report notifi	ication)		
For further info	ormation co	incerning this matter, please co	all:			
CHRISTIAN (GARCIA		561 309-5853 at ()			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed is a c	heck for the	e following amount:				
□ \$25.00 Fili	ing 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)		
Regis Divis		ection orporations	Street Address: Registration Sec Division of Corp	porations		
P.O.	Box 6321	/	The Centre of Ta	allahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REFLEX OUTDOOR SUPPLY AND EQUIPMENT LLC	
(Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Company were filed on 07/21	/2020 and assigned
lorida document number L20000213950	
his amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited liability company here	;
he new name must be distinguishable and contain the words "Limited Liability Company," the design	gnation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	2
Principal office address MUST BE A STREET ADDRESS)	2020
	\$ T
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	• •
3. If amending the registered agent and/or registered office address on our reco	ords, enter the name of the new regist
gent and/or the new registered office address here:	
Now, a f New Devict and A court	
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida	street address

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.

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
AMBR	EDWIN VALDIVIA	1737 CRESTWOOD BLVD, LAKE WORTH, FL	334(≣ Add
			□Remove
			□Change
			🗆 Add
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	be prior to date of filing or more than 90 days after filing.) Pursuant to 60, applicable statutory filing requirements, this date will not be list
ord specifies a delayed effective date, but not an effo filed.	ective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
DECEMBER 3RD 2020)