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Certified Copies	_ Certificates	of Status
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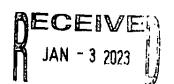
2023 JAN -3 PM 3: 55
SECRETARY OF STATE
TAIL ABARSEE BY

## **COVER LETTER**

TO: Registration Division of C					
SUBJECT:	Action Guns a Name of Lim	Amao kkC		_	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
		Name of Person  Primy Company		<del>_</del>	
	4185 S. C	Orlando Or. Address	<del></del>		
	Sanford )	F) 32 773 City/State and Zip Code		<del>_</del>	
	Markgunley 2	ook o g.m.   - Com to be used or future annual report notif	lication)	2023 JAN -3 SECRETAR) TALLAHA	THE T
For further information	concerning this matter, please co	all:		AHR AHR	es au les au
Mark I	of Person	at (321 S37- Area Code Daytime	O9 00 Telephone Numb	PM 3: 55	The state of the s
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)	Certific	Filing Fee, cate of Status & ed Copy nat 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



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

Action Guns e Amno LLC
Metion Guns e Amno L. C.  (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 Avy 04, 2020 and assigned Florida document number 120000234851
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)  Lake May F1 32746
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  Action Guns a Ammo LLC  4185 S. Onlando Dr.  Sanford F1 32773
B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered agent and/or the new registered office address here</u> :
Name of New Registered Agent:  New Registered Office Address:  HOWAN Hodges  Who Registered Office Address:  HOWAN Hodges  Enter Florida street address  Florida  Florida  Florida  Florida
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 Emply 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

If Changing Registered Agent, Signature of New Registered Agent

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company has been notified in writing of this change.

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ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be pridete:  If the date inserted in this block does not meet the apportunent's effective date on the Department of State's record	(optional) ior to date of filing or more than 90 days after filing.) Pursuant to 605.02 licable statutory filing requirements, this date will not be listed ds.
record specifies a delayed effective date, but not an effective dis filed.	e time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Pated Da 22, 202	
Signature of a member or au	uthorized representative of a member
Chris Ferrar	

Filing Fee: \$25.00

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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. Signature of a member of authorized representative of a member Typed or printed name of signee

Filing Fee: \$25.00

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 Howard Hodges 4185 S. Orlando Dr. EAdd
Sanford F1 32773 Remove Type of Action Marcus F. Burley 4185 S. Orlando Dr. \*Model Sanford F1 32773 DRemove Christopher . Ferrara 4185. S. Orlando Dr. XADD Scotord F.J. 32773 \_\_\_ DRemove ---\_\_\_ LIRemove □Remove