120000286445

(Requestor's Name)
(Address)
(133.335)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Codified Conice Codificator of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 ming officer.





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2022 JUN 21 AM 6: 2 SECRETARY OF STATE

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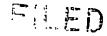
COVER LETTER

TO:

TO: Registration Se Division of Cor			
Carden's Ta	axidermy, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Richard B. Carden		
		Name of Person	
	Carden's Taxidermy, LLC		
		Firm/Company	
	8537 Gray Forest Drive		
		Address	
	Tallahassee, FL 32305		
		City/State and Zip Code	
	bryan.carden@yahoo.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Richard Carden		850 519-2008 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he 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 Addres		Street Address:	ation
Registration Section Division of Corporations		Registration Sec Division of Cor	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Carden's Taxidermny, LLC

2022 JUN 21 AM 6: 26

(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 $\frac{9/14/2020}{}$ Florida document number 1.20000286445 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) 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 registered agent and/or the new registered office address here: 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.

City

If Changing Registered Agent, Signature of New Registered Agent

_, Florida ___

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	Jennifer Carden	8537 Gray Forest Drive Tallahassee FL 32305	□ Add
			≡ Remove
			□ Change
			□Add
		□Remove	
		□Change	
			□Add
		<u> </u>	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
		 	□ Change
			□Add
			□Remove
			□Change

. II ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note:	ve date, if other than the date of filing:
he record ord is file	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 ed.
Dated]	une 17 2022 .
	Kichi B Cont
	Signature of a member or authorized representative of a member
	Richard B. Carden Typed or printed name of signee