## L20000396452





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## **COVER LETTER**

	Registration Division of	on Section   Corporations		
SUBJEC	Option	Hunters, LLC		
SOBJEC		Name of Limited Liability Company		
		es of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following:		
		Anthony Trezciak		
		Name of Person		
		Riverview, FL 33579		
		City/State and Zip Code		
		Finance@optionhunters.aiFifinance@optionhunters.ai  E-mail address: (to be used for future annual report notification)		
For further	er informatio	ion concerning this matter, please call:	υ <u>κ</u> ο	
Christop	her M Hans	nse 570 269-9885	2021 JUH 29 1	* 72
	Nar	ame of Person Area Code Daytime Telephone Number	129 F	ن. ب
Enclosed	is a check fo	for the following amount:	PH 47	411
□ <b>\$</b> 25.0	00 Filing Fed	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	ig/Fee, on of Status &	

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

Option Hunters, LLC

(Name of the Limited Liability Company as it now appears on our record (A Florida Limited Liability Company)	<u>is.</u> )
The Articles of Organization for this Limited Liability Company were filed on September 2  Torida document number L20000296452L	21, 2020 and assigned
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company here:	
e new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
rincipal office address MUST BE A STREET ADDRESS)	
ter new mailing address, if applicable:	·
ailing address MAY BE A POST OFFICE BOX)	
<del></del>	
If amending the registered agent and/or registered office address on our records, enterent and/or the new registered office address here:	the name of the new regis
Name of New Registered Agent:	2021 TA
New Registered Office Address:  Enter Florida street address	s 99
File	orida E
City	Zip Code . J
w Registered Avent's Signature, if changing Registered Agent.	TCri

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>	<u>Address</u>	Type of Action
A=AMBR	Joseph Mullins	54 Endicott Rd.	DAdd
		Stoneham, MA 02180	■ Remove
			□Change
AMBR	Michael De Los Santos	8715 Roxboro Rd	
		Bahama, NC 27503	□Remove
<del></del>	···		DAdd
			□Remove
			□Change
	<del></del>		
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		Leffective date	but not an c	effective tin	nc, at 12:01	a.m. on th	e earlier of	(b) Th	e 90th da	ıy after
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is filed.	June 23rd  Chull M.	#	20 ure of a memb	-						