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COVER LETTER

	tration Sec on of Corp				
R SUBJECT:	EEL FUN	FISHING LLC			
nonacer		Name of Limi	ited Liability Company		
The enclosed A	Articles of A	amendment and fee(s) are sub-	mitted for filing.		
Please return a	II correspon	dence concerning this matter	to the following:		
		Ross G Lavin			
			Name of Person		
		Law Office of Ross G Lav	in		
Firm/Company					
	PO Box 51				
			Address		
		Burnet, Texas 78611			
		rl@rosslavinlaw.com	City/State and Zip Code		
		E-mail address: (to be used for future annual report notifi	cation)	
For further infe	ormation co	ncerning this matter, please ca	all:		
Ross G Lavin			512 913-3702		
	Name of	Person	at () Area Code Daytime	Telephone Number	
Enclosed is a c	heck for the	e following amount:			
■ \$25.00 Fil	ing Fec	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional 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

(Name of the Limit	ed Liability Compa (A Florida Limited I	inv as it now appears	on our records.)	
The Articles of Organization for this Limited L lorida document number	iability Company	, ,	10/01/2020	and assigned
his amendment is submitted to amend the foll	owing:			
If amending name, <u>enter the new name o</u>	f the limited liab	ility company her	<u>·e</u> :	
he new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the des	signation "LLC" or the ab	breviation "L.L.C."
inter new principal offices address, if applic	able:	179 Tom Kite		<u></u>
Principal office address MUST BE A STREE	TADDRESS)	Burnet, TX 7861	1	***
			•	
nter new mailing address, if applicable:		PO Box 51		e.
Mailing address MAY BE A POST OFFICE	ROX)	Burnet, TX 7861	1	୍ ଫୁ
Tuning address MAT BE AT OST OTTICE	<u>BOM</u>			. S
. If amending the registered agent and/or agent and/or the new registered office addre		address on our rec	cords, <u>enter the nam</u>	e of the new registe
Name of New Registered Agent:	Lee Brown			
New Registered Office Address:	3685 Dunes Ro	oad		
		Enter Florid	la street address	
	Palm Beach Ga	ardens	, Florida <u></u>	410
		City		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.

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
			□Add
			□ Remove
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Note: I	the date, if other than the date of filing:
e 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 d.
Dated _	August 20 (2024)

Filing Fee: \$25.00

COVER LETTER

	gistration Se			
SURIFCT		FISHING LLC		
SUBJECT.		Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspo	ndence concerning this matter	to the following:	
		Ross G Lavin		
			Name of Person	
		Law Office of Ross G Lav	rin	
			Firm/Company	
		PO Box 51		
			Address	
		Burnet, Texas 78611		
			City/State and Zip Code	
		rl@rosslavinlaw.com		
Eas frathas i	n for		to be used for future annual report noti	lication)
		oncerning this matter, please c	aii:	
Ross G Lav			512 913-3702 at ()	
	Name of	F Person	Area Code Daytim	e Telephone Number
Enclosed is	a check for th	e 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)
Re Di P.0	diling Address gistration S vision of C D. Box 632 Ilahassee, F	section orporations 7	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REEL FUN FISHING LLC				
(<u>Name of the Limi</u>	ted Liability Compa (A Florida Limited)	ny as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited L Florida document number L20000310899		were filed on	10/01/2020	and assigned
This amendment is submitted to amend the foll	lowing:			
A. If amending name, enter the new name o	of the limited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the des	signation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	179 Tom Kite		
Principal office address MUST BE A STREE	ET ADDRESS)	Burnet, TX 7861	1	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PO Box 51 Burnet, TX 7861	1	
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office a ess here:	address on our rec	cords, <u>enter the na</u>	ne of the new regist
Name of New Registered Agent:	Lee Brown			
New Registered Office Address:	3685 Dunes Ro	oad		
		Enter Florid	la street address	
	Palm Beach Ga		, Florida _	
		City		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.

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>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			©Change
			□Add
			□Remove
			Change
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			☐Remove
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			□Add
			□Remove
			🗆 Change
			□Remove

	
	
fective date, if other than the date of filing:	(4tD
n effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 daysete: If the date inserted in this block does not meet the applicable statutory filing requirement cument's effective date on the Department of State's records.	(optional) s after filing.) Pursuant to 605.0207 s, this date will not be listed as
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier is filed.	of: (b) The 90th day after the
ted August 20	
Signature of a member or authorized representative of a member	<u> </u>
Ross G Lavin, Manager	
11. (1) 1 1 1/	

Filing Fee: \$25.00