

121 000062137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

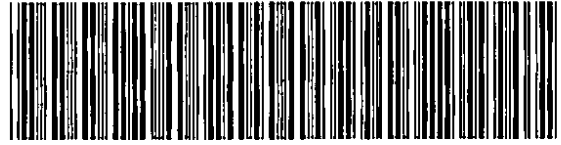
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

7/16/21  
TM

Office Use Only



000367656180

06/21/21--01015--004 \*\*25.00

21 JUN 21 AM 10:31  
Filing Office of the Secretary of State

# COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DUSTIN MONK AND THE HUSTLE, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DUSTIN MONK

\_\_\_\_\_  
Name of Person

DUSTIN MONK AND THE HUSTLE, LLC

\_\_\_\_\_  
Firm/Company

10960 FRISCO LN

\_\_\_\_\_  
Address

JACKSONVILLE, FLORIDA 32257

\_\_\_\_\_  
City/State and Zip Code

dustinmonkandthehustle@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DUSTIN MONK

904

570-0852

\_\_\_\_\_  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

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)

☐ \$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**

DUSTIN MONK AND THE HUSTLE, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

21 JUN 21 AM 10:31

The Articles of Organization for this Limited Liability Company were filed on 02/04/2021 and assigned  
Florida document number L21000062137.

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)**

DUSTIN MONK

10960 FRISCO LN

JACKSONVILLE, FL 32257

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

DUSTIN MONK

10960 FRISCO LN

JACKSONVILLE, FL 32257

**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:

DUSTIN MONK

New Registered Office Address:

10960 FRISCO LN

Enter Florida street address

JACKSONVILLE

City

Florida 32257

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.*

*Dustin Monk*

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>        | <u>Address</u>               | <u>Type of Action</u>                      |
|--------------|--------------------|------------------------------|--|
| MGR          | CANNON, WAYNE      | 2137 DELLWOOD AVE            | <input type="checkbox"/> Add               |
|              |                    | JACKSONVILLE, FL 32204       | <input checked="" type="checkbox"/> Remove |
|              |                    |                              | <input type="checkbox"/> Change            |
| AMBR         | MONK, DUSTIN       | 10960 FRISCO LN              | <input type="checkbox"/> Add               |
|              |                    | JACKSONVILLE, FL 32257       | <input type="checkbox"/> Remove            |
|              |                    |                              | <input checked="" type="checkbox"/> Change |
| AMBR         | WAKEFIELD, HEATHER | 17C PONTE VEDRA COURT        | <input type="checkbox"/> Add               |
|              |                    | PONTE VEDRA BEACH, FL 32082  | <input checked="" type="checkbox"/> Remove |
|              |                    |                              | <input type="checkbox"/> Change            |
| AMBR         | IRELAND, MICHAEL   | 4021 AMERICA AVE             | <input type="checkbox"/> Add               |
|              |                    | JACKSONVILLE BEACH, FL 32250 | <input checked="" type="checkbox"/> Remove |
|              |                    |                              | <input type="checkbox"/> Change            |
| AMBR         | WARD, CHRISTIAN    | 130 KING STREET, APT A       | <input type="checkbox"/> Add               |
|              |                    | ST. AUGUSTINE, FL 32084      | <input checked="" type="checkbox"/> Remove |
|              |                    |                              | <input type="checkbox"/> Change            |
|              |                    |                              | <input type="checkbox"/> Add               |
|              |                    |                              | <input type="checkbox"/> Remove            |
|              |                    |                              | <input type="checkbox"/> Change            |

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

CHANGE TITLE OF MONK, DUSTIN FROM AMBR TO MGR

REMOVE ALL OTHER AUTHORIZED PERSONS FROM LLC

21 JUN 21 AM 10:31

**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.

Dated 05/10/2021 11:01am

*Wayne Cannon*

Signature of a member or authorized representative of a member

WAYNE CANNON

Typed or printed name of signee