# L21000109858

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UF	P WAIT	MAIL
	(Business Entity Name)	<u></u>
<del></del>	(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	s to Filing Officer:	

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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Kara DePasquale		
		Name of Person	
	Twisted Jesters, LLC		
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	1691 SW Victor Lane		**** * -1
		Address	
	Port St. Lucie, FL 34984		100 mg
	•	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	twistedjestersllc@gmail.com		· · · · · · · · · · · · · · · · · · ·
	E-mail address: (	to be used for future annual report not	ification)
For further information e	oncerning this matter, please co	all:	, )
Pete DePasquale		863 697-9127	
Name o	f Person		ie Telephone Number
Enclosed is a cheek for the	ne following amount:		
☐ \$25.00 Filing Fee	S30.00 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)
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	-
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Twisted Jesters, LLC	annear an ann ann ann an an ann ann an ann an
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	appears on our records.) Dany)
The Articles of Organization for this Limited Liability Company were filed or	on $\frac{03/08/2021}{}$ and assigned
Florida document number L21000109858	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	ny here:
the first the fi	n, mere.
The new name must be distinguishable and contain the words "Limited Liability Company,	"the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	~~?
Catan many modificand during if amplicables	<u>:</u>
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, <u>enter the name of the new regi</u>
agent and/or the new registered office address here:	
Name of New Registered Agent:	
Non-Bookson LOSS of Addition	
New Registered Office Address:  Ent	er Florida street address
	, Florida Zip Code
1 1157	ID LOGP

#### 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
AMBR	Gary Franklin	5223 Palmetto Drive	
		Fort Pierce, FL 34982	<b>≘</b> Remove
		<del></del>	☐ Change
			□Add
			□Remove
		<del></del>	□Change
			- Remove
			Change
			Add
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			□ Change

## Page 2 of 3

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ctive date, if other than (	06/01/2023	(optional)
effective date is listed, the date	must be specific and cannot be prior to date of filing	g or more than 90 days after filing.) Pursuant to 605.02 filing requirements, this date will not be listed
	e Department of State's records.	Time requirements, and take with the following
acord enocifice a dalay	und officially data, but not an official	ive time at 12:01 a.m. on the earlier
ne 90th day after the i		ive time, at 12:01 a.m. on the earlier
05/22	2023	
d	·	
	$\Lambda$	
<u>Kara C</u>	Signature of a member or authorized represen	

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