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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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A. BUTLER
JAN 27 2022

COVER LETTER

TO:

Registration Section

Div	ision of Cor	rporations			
CUBIECE	First Due A	Armory LLC			
SUBJECT:		Name of Lin	nited Liability Company		
The enclosed	I Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following:		
		Paul Combs			
			Name of Person		 -
		First Due Armory LLC			
			Firm/Company		
		9141 Lehall Square E			
			Address		
		Lakeland, Florida 33810			
		pare2006@icloud.com	City/State and Zip Code	:	
		· ·	to be used for future annua	report notification)	
For further in	nformation c	oncerning this matter, please c	ail:		
Paul Combs				‡7-1001	
	Name o	f Person	at () Area Code	Daytime Teleph	one Number
Enclosed is a	check for th	ne following amount:			
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg	iling Addres Pistration S			ation Section	wig.
P.C). Box 632	7	The Ce	on of Corporation entre of Tallaha	ssee
Tal	lahassee, I	FL 32314	2415 N	l. Monroe Stree	t, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

First Due Armory LLC		-527 · · ·	
(Name of the Lim	ited Liability Company as it now a (A Florida Limited Liability Compa	opears on our records.)	
	(X) What Elimica Elability Comp.		***
		May 12 2021 - 1-1	: 1 tz
The Articles of Organization for this Limited	Liability Company were filed or	n <u>wiay 15, 2021</u>	Fand assigned
Torida document number L21000223025			
iorida document number	 •		
This amendment is submitted to amend the fol	Howing:		
ms and a saomited to afficial the following	noving.		
A. If amending name, enter the new name	of the limited liability compar	ıv here:	
<u> </u>	or the minet having compan	<u></u>	
he new name must be distinguishable and contain the	words "Limited Liability Company."	the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		
Principal office address MUST BE A STRE	FT ADDRESS)		
			
Enter new mailing address, if applicable:			
<u>Mailing address MAY BE A POST OFFICE</u>	E BOX)		
·····			
			_ -
If amending the registered agent and/or	registered office address on o	ur records, enter the	name of the new regist
gent and/or the new registered office addre	ess here:		
	Paul Combs		
Name of New Registered Agent:	raui Combs		
	9141 Lehall Square E		
New Registered Office Address:			-
	Enter	· Florida street address	
	Lakeland	#71 ()	33810
	City	Florida	Zip Code
	C tỷ,		Zıp 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
MGR	Paul Combs	9141 Lehall Square E. Lakeland, Florida 33810	■Add
			□Remove
			□ Change
			□ Add
			□Remove
			□Change
			🗆 Add
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Effective date,	if other than	the date of f	iling:			(a	ptional)	
I an effective date Note: If the date	is listed, the date in thi	must be specific s block does r	c and cannot t tot meet the	pe prior to date applicable st	of filing or mo atutory filing	re than 90 days requirements	after filing.) Pui This date will	suant to 605.0207 not be listed as
document's effec	rtive date on th	e Department	of State's re	ecords.		- quite mem	ini. date will	not be fisted as
	a delayed offe	ctive date, but	not an effe	ctive time, at	12:01 a.m. oi	n the earlier of	f: (b) The 90	th day after the
record specifies								
record specifies d is filed.								
d is filed.	1		2022					
d is filed.	1		2022					
d is filed.	1		2022		<u></u>			
d is filed.	1	Signature ((el	or authorized re	epresentative o	f a member		