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## **COVER LETTER**

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Tallahassee, FL 32314

TO:	Registration Se Division of Cor			
CUBIE	GET'EM TI	GHT, LLC		
SUBJE	.C1:	Name of Limi	ted Liability Company	<del>-</del> -
The end	closed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		MICHAEL E. DEAN		
			Name of Person	<u></u>
		DEAN LAW FIRM, LLC		
			Firm/Company	
		230 NE 25TH AVENUE, S	SUITE 300	
			Address	
		OCALA FL 34470		
		<u> </u>	City/State and Zip Code	
		MIKE@DEANFIRM.COM	to be used for future annual rep	ort patification)
For for	ther information c	oncerning this matter, please or	•	or nome and n
		oncerning this matter, prease co		700
MICH.	AEL E. DEAN		at () 387-8	
	Name o	f Person	Area Code	Daytime Telephone Number
Enclos	ed is a check for th	ne following amount:		
□ \$2	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S Division of C P.O. Box 632	Section Corporations	Division of	ress: on Section of Corporations re of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GET'EM TIGHT, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 5/21/2021 and assigned Florida document number 121000237499 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) 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

## 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 ameading 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
AMBR	MICHAEL E. DEAN	230 NE 25TH AVENUE, SUITE 300	<b>=</b> Add
		OCALA. FL 34470	□Remove
			□Change
AMBR	KRISTIN DEAN	230 NE 25TH AVENUE, SUITE 300	<b>■</b> Add
		OCALA, FL 34470	Remove
			□Change
AMBR	ERIC D. DEAN	230 NE 25TH AVENUE, SUITE 300	
		OCALA, FL 34470	□Remove
			🗏 Change
			□ Add
			Remove
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te: If the date inserted in t	n the date of filing: te must be specific and cannot be his block does not meet the ap the Department of State's reco	oplicable statutory filin	ore than 90 days after filing. g requirements, this date	) Pursuant to 605.0207
ecord specifies a delayed ef is filed.	fective date, but not an effecti	ve time, at 12:01 a.m. (	on the earlier of: (b) Th	e 90th day after the
OCTOBER 26.	2021			

Typed or printed name of signee