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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STEELE PURSUITS LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Steele Pursuits LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Lim	mpany as it now appears on our records.) ited Liability Company)	
	any were filed on 07/02/2021	and assigned
Florida document number L21000303000		
This amendment is submitted to amend the following:		
ne Articles of Organization for this Limited Liability Company were filed on 07/02/2021 and assigned orida document number L21000305866  als amendment is submitted to amend the following:  If amending name, enter the new name of the limited liability company here:  e new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." on the new principal offices address, if applicable:		
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	5)	
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(Mailing address MAY BE A POST OFFICE BOX)		एक न 🕒
		SE 13
B. If amending the registered agent and/or registered	d office address on our records, §	enter the name of the new
registered agent and/or the new registered office address	<u>here</u> :	
Name of New Registered Agent:		
Nam Projetared Office Address:		
New Registered Office Address.	Enter Florida street address	
	ro e	
	, Florie	aa 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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AP/MGR	David A. Little	7901 4th St N STE 300	<b>⊠</b> Add
		St. Petersburg, FL 33702	☐ Remove
			□ Change
			Remove
			Change
			☐ Remove
			☐ Change
			Add
			Remove
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For a large at at at the confession.	(optional)	
Effective date, if other than the date of filing:  (If an effective date is fisted, the date must be specific and cannot be prio Note: If the date inserted in this block does not meet the applie document's effective date on the Department of State's records	or to date of filing or more than 90 days after filing.) Pursuant to 60 cable statutory filing requirements, this date will not be li-	05.0207 (3 sted as th
the record specifies a delayed effective date, but no b) The 90th day after the record is filed.	ot an effective time, at 12:01 a.m. on the ear	lier of:
Dated July 12 2021	<u>-</u> .	
	horized representative of a member	

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Typed or printed name of signee

Filing Fee: \$25.00