K21000382071

| MAIL |
|------|
| |
| |
| |
| |
| - |
| š |
| |
| |
| |
| |
| |
| |
| |
| |
| |

Office Use Only



500379603125

01-18/22-010.0--016-******25.00

22 FER 24 - FM 3: 37

T. MATTHEWS MAR 1 4 2022



January 25, 2022

JESS H. YOUNG PO BOX 2059 CONRDE, TX 77305

SUBJECT: NO LIMITS FISHING LLC

Ref. Number: L21000382071

We have received your document for NO LIMITS FISHING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document. We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 022A00001943

Tekayla T Matthews OPS

COVER LETTER

| | Registration Section Division of Corporations | RECEIVED |
|---------------|---|--|
| SUBJEC | NO LIMITS FISHING LLC Name of Lis | 2022 FEB 24 AM 8: 12 SECRETARY OF STATE TALLAHASSEE. FL |
| The enclo | sed Articles of Amendment and fee(s) are su | bmitted for filing. |
| Please ret | turn all correspondence concerning this matte | r to the following: |
| | JESS 1 | H. YOUNG MGRM Name of Person |
| | | Firm/Company |
| | P.O. R | SOX 2059 Address |
| | CONRO | E Ty. 77305 City/State and Zip Code |
| | E-mail address: | 1638@GMAIL, Com (to be used for future annual report notification) |
| For furth | er information concerning this matter, please | call: |
| JESS H. | YOUNG / Benjamin Cooper | M& at (281 Area Code) 300-7401 336-848-6537 Daytime Telephone Number |
| Enclosed | is a check for the following amount: | |
| \$2 5. | 00 Filing Fee S30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & ☐ \$60.00 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 | Street Address: Registration Section |
| | Division of Corporations | Division of Corporations |

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| NO LIMITS FISHING LLC | | 22 FER | 21. FH 3: 37 |
|---|--|--------------------------------------|------------------------------|
| (Name of the Limi | ted Liability Company as it nov (A Florida Limited Liability Co | v appears on our records.) mpany) | |
| The Articles of Organization for this Limited L | iability Company were file | d on August 26, 2021 | and assigned |
| Florida document number L21000382071 | · | | |
| This amendment is submitted to amend the foll | lowing: | | |
| A. If amending name, enter the new name o | of the limited liability com | pany here: | |
| The new name must be distinguishable and contain the | words "Limited Liability Compar | ny," the designation "LLC" o | or the abbreviation "L.L.C." |
| Enter new principal offices address, if appli | cable: | | |
| (Principal office address MUST BE A STREI | ET ADDRESS) | | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| 2 | | | |
| (Mailing address MAY BE A POST OFFICE | <u></u> | | |
| | | | |
| B. If amending the registered agent and/or agent and/or the new registered office addre | registered office address o ess <u>here</u> : | n our records, <u>enter th</u> | e name of the new registered |
| Name of New Registered Agent: | BENJAMIN COOPER | MRG | |
| New Registered Office Address: | 117 COCO PLUM DR., | UNIT 5 | |
| | | Enter Florida street address | |
| | MARATHON | , Flor | ida ³³⁰⁵⁰ |
| | City | | 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | Name | Address | Type of Action |
|--------------|-----------------|---------------------------|-------------------|
| AMGR | BENJAMIN COOPER | 117 Coco Plum Dr., Unit 5 | ≅Add |
| | | Marathon, Fl 33050 | □Remove |
| | | | □Change |
| AMGR | ANGELA COOPER | 117 Coco Plum Dr., Unit 5 | = Add |
| | | Marathon, Fl 33050 | □Remove |
| | | | □Change |
| MGR | BENJAMIN COOPER | 117 Coco Plum Dr., Unit 5 | ≅Add |
| | | Marathon, Fl 33050 | □Remove |
| | | | □Change |
| MGR | ANGELA COOPER | 117 Coco Plum Dr., Unit 5 | \equiv Add |
| | | Marathon, Fl 33050 | □Remove |
| | | | □Change |
| MGKM | JESS H. YOUNG | 117 COCO PLOM DA #15 | |
| | | MARATHUFL. 33050 | PRemove |
| | | | []Change |
| | | | 🗀 Add |
| | | | □Remove |
| | | | □ Change |

| | See | ATTACHED | AMENDMENT | No. 1 |
|-----------------|----------------------|---|--|---|
| | | 13 | | |
| | | <u> </u> | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | |
| • | | ···· | | |
| | | | | |
| | | | | |
| | | | | |
| | | <u> </u> | | |
| | | | | |
| | | | | |
| | | <u> </u> | | |
| | | | | |
| | | | | |
| | | | | |
| i ffective c | late if other | than the date of filing: | January 5, 2022 | (optional) |
| If an effective | e date is listed, th | ne date must be specific and c | annot be prior to date of filing or me | ore than 90 days after filing.) Pursuant to 605.0207 (3 |
| | | in this block does not me on the Department of Sta | | g requirements, this date will not be listed as the |
| document : | S CITCUIT C GAIC | on the Department of St | ite s records, | |
| record en | acifiae a dalaya | ul affective date but not a | n affective time at 12:01 a.m. c | on the earlier of: (b) The 90th day after the |
| d is filed. | cines a delaye | d checisve date, out not a | ii circeave time, at 12.01 a.m. t | on the carrier of (b) The Join day after the |
| | | | | |
| Janu Dated | ary 5, 2022 | • | | |
| | | 7/ 1/ 11 | | |
| | | 1856 H | 3/ | |
| | | Signature of a me | emberor authorized representative | of a member |
| | Jess H. Young | MGRM | | |
| | | 110/11 | yped or printed name of signee | |

EU E COCOO