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

Office Use Only



700382204587

RECEIVED

MAR 3 1 2027 ALBRITTON

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

03/28/22

NAME: NAUTILUS AMMUNITION LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 29, 2022

FLORIDA FILING

SUBJECT: NAUTILUS AMMUNITION LLC

Ref. Number: L21000426587

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

A Please Keep Original File Dost Mark you!

Irene Albritton Regulatory Specialist III

Letter Number: 922A00007263

www.sunbiz.org

9

....

COVER LETTER

TO: Registration S Division of Co			
Nautilus A	mmunition LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The state of		in to the	
	Amendment and fee(s) are sul	_	
Please return all correspo	ondence concerning this matter	to the following:	
	Steven L. Hayes		
		Name of Person	
	Steven L. Hayes, PA		
		Firm/Company	 -,
	P.O. Box 4929		
		Address	
	Clearwater, Florida 33758		
		City/State and Zip Code	***
	steve@slhayespa.com	to be used for future annual report no	diffication
For further information of	concerning this matter, please c	·	ancaron,
Steven Hayes		727 238-5754	
	of Person	at ()	me Telephone Number
T. Mille G		, we come buyin	the receptione reactions
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 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)
Mailing Addres Registration S	Section	Street Address: Registration Se	ection
Division of C	Corporations	Division of Co	orporations

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

Nautilus Ammunition LLC			
(Name of the Lim	ited Liability Comp. (A Florida Limited	any as it now appears on our re Liability Company)	ecords.)
The Articles of Organization for this Limited I	Liability Company	were filed on 9-28-21	and assigned
Florida document number 1.21000426587	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liah	oility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designation	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		626 Grand Central Street	2022
		Clearwater, Florida 33756	700 # 11
			2
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		626 Grand Central Street	SSE TO
		Clearwater, Florida 33756	五五 3
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office : ess here:	address on our records. <u>er</u>	ter the name of the new registered
Name of New Registered Agent:	Steven L Haye	s	
New Registered Office Address:	2600 Eastbay D	Orive, Suite 230	
		Enter Florida street aa	dress
	Largo		Florida 33771
		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>	<u>Name</u>	Address	Type of Action
President	Daniel Duggan	·	□Add
			□Remove
		626 Grand Central Street, Clearwater, FL 33756	= Change
VP	Marco Lombardo		🗆 🗆 Add
		<u>-</u> .	□Remove
		626 Grand Central Street, Clearwater, FL 33756	
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

						-
						_
	. ,.					-
.		·				-
						_
**		<u> </u>				-
						-
-					 · · · - · · · - · · · · - · · · · ·	-
	***		·			
						-
						-
						-
						•
						•
iffactive data if other than	the date of filing.			(antion	a D	
Effective date, if other than fan effective date is listed, the date Note: If the date inserted in thi document's effective date on the	s block does not me	annot be prior to da ect the applicable	te of filing or more:	(option: than 90 days after fill quirements, this d	ing.) Pursuant to 605	5,0207 (.ed as t
record specifies a delayed effe	ctive date, but not as	n effective time,	at 12:01 a.m. on t	he earlier of: (b)	The 90th day afte	r the
a is filed,						
	·	2022				
d is filed. Dated March 25						
Dated March 25	•					

Filing Fee: \$25.00