

121000516701

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22 JAN -2 PM 3:54

T. MATTHEWS

JAN 13 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Phoenix Xtreme LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bob Litwiler
Name of Person

Phoenix Xtreme LLC
Firm/Company

10845 Old Tampa Rd.
Address

Parrish FL 34219
City/State and Zip Code

pxtreme202@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly Litwiler at (207) 710-6333
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Phoenix Xtreme LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

22 Dec 2021 3:54

The Articles of Organization for this Limited Liability Company were filed on 15 Dec 2021 and assigned Florida document number L21000516701.

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:

Kimberly Litwiler

New Registered Office Address:

10845 Old Tampa Rd

Enter Florida street address

Parrish

City

, Florida

34219

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.

Kimberly Litwiler

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Bob Litwiler	10845 Old Tampa Rd	<input type="checkbox"/> Add
		Parrish FL 34219	<input checked="" type="checkbox"/> Remove
		10845 Old Tampa Rd	<input type="checkbox"/> Change
MGR	Kimberly Litwiler	Parrish FL 34219	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 30 Dec., 2021

Signature of a member or authorized representative of a member

Bob Litwiler

Typed or printed name of signee