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A. BUTLER
SEP - 1 2022

COVER LETTER

TO: Registration So Division of Co				
	Soap Company, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
	Amendment and fee(s) are sub	•		
Please return all correspo	ondence concerning this matter	to the following:		
	Mike K Taylor			
		Name of Person		
	Pirate Bay Soap Company			
		Firm/Company		
	795 Larkview St.			
		Address		
	Merritt Island, FL 32953			
	setsail@piratesbaysoap.con	City/State and Zip Code		
	- -	to be used for future annual report notif	ication)	
For further information of	concerning this matter, please c	all:		
Mike K. Taylor		321 474-4505 at ()		
Name o	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for t	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	
<u>Mailing Addres</u> Registration		Street Address: Registration Sec	ction	
Division of C	Corporations	Division of Corporations		
P.O. Box 632 Tallahassee,		The Centre of T 2415 N. Monro Tallahassee, FL	e Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) Pirates Bay Soap Company, LLC The Articles of Organization for this Limited Liability Company were filed on 12/13/2021/17/13/EE, FL Florida document number 1.21000523658 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: Dina F Taylor Name of New Registered Agent: 795 Larkview St. New Registered Office Address: Enter Florida street address Merritt Island Florida 32953
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_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Dina F Taylor		□Add
		795 Larkview St. Merritt Island, FL 32953	■ Remove
			□Change
MGR	Mike K Taylor	795 Larkview St. Merritt Island, FL 32953	= Add
			□Remove
			□Change
			
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			Remove
			□Change
			□ Add
			□ Remove
			Change

							
							
							
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effective d te: If the	ate, if other than the date is listed, the date must date inserted in this blaceffective date on the D	st be specific an lock does not (d cannot be prior meet the applic	cable statutory f	or more than 90 d		
cord speci s filed.	ifies a delayed effectiv	e date, but no	t an effective t	ime, at 12:01 a.	m. on the earlie	er of: (b) The 90	Oth day after the
ed	(une 11		, 202	2			
_	(une 11 Make	Signature of a	Tell member or mith	orized representa	tive of a member		
	Mike						