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(Requestor's Name)
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PICK-UP WAIT MAIL
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## **COVER LETTER**

	egistration Se ivision of Cor			
etin tron	Outdoor Ou	=		
SUBJECT	]:		ited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all correspo	indence concerning this matter	to the following:	
		Cliff Pardue		
			Name of Person	
		MAE46 Flooring LLC		
			Firm/Company	_
		505 65th St Ct NW		
			Address	<del></del>
		Bradenton, FL 34209		
			City/State and Zip Code	<del></del>
		Cliff.Pardue@icloud.com		
		E-mail address: (	to be used for future annual report no	tification)
For further	information c	oncerning this matter, please c	all:	
Cliff Pardu	ıe		941 7187961 at ( )	
	Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is	s a check for th	ne 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		Street Address: Registration S	ection	
D	ivision of C	orporations	Division of Co	
	O. Box 632		The Centre of	
I.	allahassee, I	L 32314	2415 N. Monre	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Outdoor Outpost LLC		27
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	P P C C C C C C C C C C C C C C C C C C
he Articles of Organization for this Limited Liability C	Company were filed on December 23, 2021	and assigned
orida document number L22000002221	<u>_</u> .	}~ ±
nis amendment is submitted to amend the following:		
If amending name, enter the new name of the lim	ited liability company here:	
AE46 Flooring LLC		
e new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		
<u>rincipal office address MUST BE A STREET ADDI</u>	<u>(E33)</u>	
nter new mailing address, if applicable:		
Aailing address MAY BE A POST OFFICE BOX)		
		<del></del>
If amending the registered agent and/or registered	d office address on our records, enter the na	me of the new register
ent and/or the new registered office address here:	a villet addites on our records, enter the Ba-	are of the first register
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	Çitv	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 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
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			Remove
		<del></del>	Change
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an effectivente: If the cument's	ne date inserted in t s effective date on t	fective date, b		Tective time		on the earlier	r of: (b) Th			

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