L22000014109

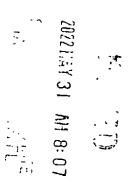
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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05/31/22--01011--022 **25.00



of 3/6/2022

COVER LETTER

	ation Section n of Corporations		
ME	ERADO, LLC		
SUBJECT:	Name of I	Limited Liability Company	
The enclosed Ar	ticles of Amendment and fee(s) are s	submitted for filing.	
Please return all	correspondence concerning this mat	ter to the following:	
	CHARLES TUCKER		
		Name of Person	
	MERADO, LLC		
		Firm/Company	
	1423 North Bay Drive		
		Address	
	Lynn Haven FL 32444		
		City/State and Zip Code	
	CHUCK@CHUCKTUC	KER.COM is: (to be used for future annual report notification)	
For further infor	mation concerning this matter, pleas		
CHUCK TUCK	ER	850 960-9605	
	Name of Person	at ()	
Enclysed is a che	eck for the following amount:		
\$25.00 Filin	g 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 State Certified Copy (additional copy is enc	
Regist Divisio P.O. B	ration Section on of Corporations fox 6327 assee, 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**



2022 MAY 31 AH 8: 07

MERADO. LLC			0.	M11 01 01
(Name of the Limi	ted Liability Compa (A Florida Limited	iny as it now appears (Liability Company)	on our records.)	-
The Articles of Organization for this Limited Liability Company were filed on 01/05/2022				assigned
Horida document number L22000014109				
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here	<u>e</u> :	
CHUCK TUCKER, LLC				
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the des	ignation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applic	able:	1423 North Bay D	Orive	
(Principal office address MUST BE A STREET ADDRESS)		Lynn Haven FL 32444		
		1423 North Bay D	Dr ive	,
Enter new mailing address, if applicable:		Lynn Haven FL 32444		
Mailing address MAY BE A POST OFFICE	Lymriaven i E 3.			
B. If amending the registered agent and/or ingent and/or the new registered office addressed Name of New Registered Agent:			ords, <u>enter the name of the</u>	new register
Name Descriptioned OFF and Advance.	13800 PANAN	IA CITY BEACH PA	ARKWAY, SUITE 117	
New Registered Office Address:	Enter Florida street address			
	PANAMA CITY BEACH		Florida 32407	
		City	Zip Co	de
New Registered Agent's Signature, if changing	Registered Agent:	<u>.</u>		

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.

ed 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
MGR	CHARLES TUCKER	1423 NORTH BAY DRIVE	□ Add
		LYNN HAVEN FL 32444	Remove
			hange
			□bbA□
			□Remove
			□Change
			□Add
			Remove
			□Change
			🗆 Add
			Remove
			Change
			🗆 Add
			Remove
			□ Change
		·	□Remove
			C.C.

ii am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
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-	
-	
Note:	ive date, if other than the date of filing:
ie recoi ord is fi	ed 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 led.
Dated	MAY 26. Signature of a member or authorized representative of a member
	CHARLES TUCKER
	Typed or printed name of signee

Filing Fee: \$25.00