# L22000253122

(Requestor's Name)	
(Address)	
(Address)	0004116
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	U7/08/23010
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	



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Office Use Only

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CF 12/12/2023

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: City Tish 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:
Amy Lunger Name of Person
Firm/Company
2381 Hickey Creek Rd
Alua FL 33920
City/State and Zip Code
For further information concerning this matter, please call:
Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25,00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certificate of Status & Certificate of Status & Certificate 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



August 12, 2023

AMY LUNGER 2381 HICKEY CREEK ROAD ALVA, FL 33920

SUBJECT: CITY FISH, LLC Ref. Number: L22000253122

We have received your document for CITY FISH, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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.

Claretha Golden Regulatory Specialist II

6 5 1 1 (10)

Letter Number: 223A00018424

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Liability Company as it now Florida Limited Liability Con	Z023 [] appears on our records.)	<u>2011 PH</u> 5: 55
The Articles of Organization for this Limited Liab		on <u>6-2-20</u> 2	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability comp	<u>any here</u> :	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company	," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:		
Principal office address MUST BE A STREET	ADDRESS)		<del></del>
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE B	23)	<del></del>	
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office address on here:	our records, enter the na	me of the new registered
Name of New Registered Agent:	<u>Aaron</u>	Smith	
New Registered Office Address:	340 Church		
	FELDA En	ter Florida strvet address	22021
	City	Florida _	2373U Zip Code
Name Danishan and Assault Ct. Assault Co. Assault			

### 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

Title Name **Address** Type of Action Hmylunger 2381 Hickey Creek Rd JAdd Alva, FL 33920 XRemove \_\_\_\_\_ □Change Haron Smith , 340 Church Road XAdd MGR FELDA, FLORIDA 33930 Remove \_\_\_\_\_ □Change \_\_\_\_\_ □Change \_\_\_\_\_ □Remove \_\_\_\_\_\_ □Change \_\_\_\_\_ □Add \_\_\_\_\_\_ □Change \_\_... \_\_\_\_\_ □Add □Remove 

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. Effective date	e, if other than the date of filing:(optional)
evote: If the da	ate 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) ate inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the fective date on the Department of State's records.
the record specificord is filed.	ries a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated <u>/2</u>	-4-23
_	Signature of a member or authorized representative of a member
	Wanda Lunger Typed or printed name of signee