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COVER LETTER

TO: **Registration Section Division of Corporations**

•

REEF GANGSTER LLC

SUBJECT:

•

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:

	Tetiana Sammons			202
	Reef Gangster LLC	Name of Person		1122 JUL 20
		Firm/Company	·1.`	2
	1338 N Lombardo Ave	· · · -·	· · · · · · · · · · · · · · · · · · ·	
	Lecanto, FL, 34461	Address	c c	(L)
	mail.reefgangster@gmail.co	City/State and Zip Code		
		to be used for future annual report notifi	zation)	
For further information e	oncerning this matter, please e	all:		
Tetiana Sammons		352 496-1805		
Name o	f Person		Telephone Number	
Enclosed is a check for th	he following amount:			
■ \$25.00 Filling Fee	[1] \$30,00 Filing Fee & Certificate of Status		S60.00 Filing Fee, Certificate of Status & Certified Copy taidutional copy is enclose	
Mailing Addres	<u>v:</u>	Street Address:		

<u>Mai</u> **Registration Section** Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

REEF GANGSTER LLC

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

The Articles of Organization for this Limited Liability Company were filed on [June 20, 2022	and assigned
Florida document number 1.22000279218		

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 "LLC"."

Enter new principal offices address, if applicable:	동가 : - 년1	2022	
(Principal office address MUST B <u>E A STREET ADDRESS)</u>	 ······································		<u> </u>
	• • • •	5	<u> </u>
	11 [7]-	22	· ·
Enter new mailing address, if applicable:	 ·	<u></u>	`
(Mailing address MAY BE A POST OFFICE BON)		č	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	udress
	Gir	Florida Ziv 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, <u>enter the title, name, and address of each person</u> being added or removed from our records:

•

•

MGR = Manager AMBR = Authorized Member

Title	Name	Address	<u>Type of Action</u>
AR	GARY R SAMMONS	1338 N Lombardo Ave	🖬 Add
		Lecanto, FL 34461 US	🗆 Remove
			DChange
			🗆 Add
			□Remove
			DChange
			Remover
	V		œ ⊡Add
		· · · · · · · · · · · · · · · · ·]Remove
		···· · ·	IChange
			🗆 Add
]Remove
			[]Change
<u> </u>		·	⊡Add
			🗌 Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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N,

07/06/2022		
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		2022
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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 July	2022
· · · · · ·	Signature of a member or authorized representative of a member
	etiana Sammons
-	Typed or printed name of signee