

122000321826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

*[Signature]*



000391873310

08/04/22--01016--018 \*\*25.00

RECEIVED  
FALL HARBOR, PA  
2022 AUG 4 PM 4:03

2022 AUG 4 PM 4:03

516-715

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Roll Time Brazilian Jiu Jitsu  
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:

Josh McDonald

Name of Person

Roll Time Brazilian Jiu Jitsu

Firm/Company

13927 Sugar Pine Ct

Address

Tallahassee, FL 32225

City/State and Zip Code

buffj2u@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Josh M

Name of Person

at (216) 217-8575

Area Code

Daytime Telephone Number

Enclosed is a check for the 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  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2105 N. Monroe St.  
Tallahassee, FL 32310

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32310

2009 JUN 4 PM 4:03

FILED

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Roll Time Brazilian Jiu Jitsu

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

The Articles of Organization for this Limited Liability Company were filed on July 20, 2022 and assigned Florida document number L22000321826.

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:

(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:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Josh McDonald</u>	<u>13927 Sugar Pine Ct</u>	<input checked="" type="checkbox"/> Add
		<u>Jacksonville, FL 32225</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Amanda M McDonald</u>	<u>13927 Sugar Pine Ct</u>	<input type="checkbox"/> Add
		<u>Jacksonville, FL 32225</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED  
DATE 11-14-2011 BY 60322

2002 AUG -4 PM 4:03  
TALLAHASSEE FL 32304

(If an effective date 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)(b)

Dated

Signature of a member or authorized representative of a member