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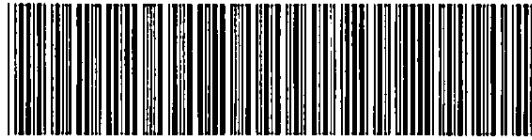
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JAN 18 2023



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10/25/22--01019--032 \*\*60.00

FILED  
2022 OCT 25 AM 8:47  
JUL 18 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CHUKKERCHUKKER, 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:

JAMES T. TAYLOR

Name of Person

TAYLORMADE SOFTWARE INC.

Firm/Company

c/o ChukkerChukker, LLC

200 2<sup>ND</sup> AVE S., UNIT 162

Address

St. Petersburg, FL 33701

City/State and Zip Code

JTE@TAYLORMADESOFT.COM

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

For further information concerning this matter, please call:

JAMES T. TAYLOR

Name of Person

at ( 619 ) 618-6284

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  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

ChukkerChukker, LLC

(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 09/01/2022 and assigned Florida document number L22000383998.

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 "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

26 West Center

c/o ChukkerChukker, LLC

Building 8, Room 135

State College of Florida, Manatee

5840 26th St. W, Bradenton, FL 34207

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

200 2nd Ave. S

UNIT 162

SAINT PETERSBURG, FL 33701

**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:

TAYLORMADE SOFTWARE, INC.

New Registered Office Address:

SCF 26 West Center, Building 8, Rm 135

5840 Enter Florida street address 26th Street West

BRADENTON

Florida

34207

City

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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	VLADIMIR RIVKIN	1333 Monroc Street	<input type="checkbox"/> Add
		Hollywood, FL 33019	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change (Address)
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

1. Changed address for managing partner Vladimir Rivkin.
2. Changed physical address for ChukkerChukker LLC.
3. Changed physical address for Registered Agent.

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 October 20<sup>th</sup> 2022



Signature of a member or authorized representative of a member

JAMES T. TAYLOR, MGR

Typed or printed name of signee

Filing Fee: \$25.00