## -K22000395039

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



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## **COVER LETTER**

TO:

Registration Section

| Divisi                   | on of Cor                         | porations                                             |                                                                    |                                                                                         |  |
|--------------------------|-----------------------------------|-------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--|
|                          |                                   | Firearms LLC                                          |                                                                    |                                                                                         |  |
| SUBJECT: _               | Name of Limited Liability Company |                                                       |                                                                    |                                                                                         |  |
|                          |                                   |                                                       |                                                                    |                                                                                         |  |
| The enclosed A           | Articles of                       | Amendment and fee(s) are sub                          | mitted for filing.                                                 |                                                                                         |  |
| Please return a          | ll correspo                       | ondence concerning this matter                        | to the following:                                                  |                                                                                         |  |
|                          |                                   | David J Holm                                          |                                                                    |                                                                                         |  |
|                          |                                   |                                                       | Name of Person                                                     |                                                                                         |  |
|                          |                                   | On Target Firearms LLC                                |                                                                    |                                                                                         |  |
|                          |                                   |                                                       | Firm/Company                                                       |                                                                                         |  |
|                          |                                   | 925 Brookwood Drive                                   |                                                                    |                                                                                         |  |
|                          |                                   | <del></del>                                           | Address                                                            |                                                                                         |  |
|                          |                                   | Lakeland, FL 33813                                    |                                                                    |                                                                                         |  |
|                          |                                   |                                                       | City/State and Zip Code                                            |                                                                                         |  |
|                          |                                   | Jholm76@gmail.com                                     |                                                                    |                                                                                         |  |
| For further info         | ormation co                       | e-mail address: (<br>oncerning this matter, please ca | to be used for future annual reportable:                           | it notification)                                                                        |  |
| David J Holm             |                                   |                                                       | 863 698-30:                                                        |                                                                                         |  |
|                          | Name o                            | f Person                                              | Area Code D                                                        | aytime Telephone Number                                                                 |  |
| Enclosed is a c          | heck for th                       | ne following amount:                                  |                                                                    |                                                                                         |  |
| ≅ \$25.00 Fili           | ing Fee                           | ☐ \$30.00 Filing Fee & Certificate of Status          | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |  |
|                          | ng Addres<br>stration S           |                                                       | Street Addre<br>Registration                                       |                                                                                         |  |
| Division of Corporations |                                   |                                                       | Division of                                                        | Corporations                                                                            |  |
|                          | Box 632 hassee, I                 | 7<br>FL 32314                                         |                                                                    | of Tallahassee<br>onroe Street, Suite 810                                               |  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

On Target Firearms LLC

2022 OCT 17 AM 9:55

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) SECRE ARE DESTATE TALLAHASSEE, FI The Articles of Organization for this Limited Liability Company were filed on  $\frac{09/12/22}{2}$ and assigned Florida document number \_L22000398039 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

## 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>       | Address                  | Type of Action |
|--------------|-------------------|--------------------------|----------------|
| MGR          | HART, DEANE L, IV | 3101 BLACKWATER OAKS WAY | □Add           |
|              |                   | MULBERRY, FL 33860       | ■Remove        |
|              |                   |                          | □Change        |
|              |                   |                          |                |
|              | •                 |                          | □Remove        |
|              |                   |                          | □Change        |
|              | <del></del>       |                          | □Add           |
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| If an effective date is listed, the da <b>Note:</b> If the date inserted in t | n the date of filing:                                                                                |
| e record specifies a delayed ef<br>ed is filed.                               | fective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| October 12,<br>Dated                                                          | 2022                                                                                                 |
| Dated                                                                         |                                                                                                      |
|                                                                               |                                                                                                      |
|                                                                               | Signature of a member or authorized representative of a member                                       |
| David J Holm                                                                  |                                                                                                      |
|                                                                               | Typed or printed name of signee                                                                      |