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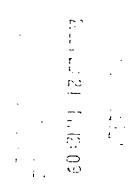
(Requestor's Name)
(Address)
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document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





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COVER LETTER

TO: Registration Se Division of Cor				
	S DIRECT CLUB LLC			
SUBJECT:	Name of Lin	nited Liability Company	·····	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	KIMBERLY SMITH			
	<u></u>	Name of Person		
FIREARMS DIRECT CLUB LLC				
		Firm/Company		
	2940 CORAL STRIP PAR	RKWAY		
		Address		
	GULF BREEZE, FL 3256	3		
		City/State and Zip Code	, , , , , , , , , , , , , , , , , , ,	
	E-mail address:	to be used for future annual report noti	fication)	
For further information c	oneerning this matter, please c	all:		
KIMBERLY SMITH		at ()		
Name o	of Person	at ()	e Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Fiting Fee	☐ \$30 00 Filing Fee & Certificate of Status	I'l \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address:	ction	
Registration Section Division of Corporations		Registration Se Division of Cor		
P.O. Box 632	•	The Centre of T	allahassee	
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on our record Liability Company)	ds.)
y were filed on 1/1/2023	and assigned
bility company here:	
ility Company," the designation "LLC	" or the abbreviation "L.L.C."
	(C)
	<u> </u>
	2 :
address on our records, <u>enter</u>	the name of the new registe
Enter Florida street addres	׫
	orida
	address on our records, enter

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>	Address	Type of Action
MGMR	KIMBERLY SMITH	2940 CORAL STRIP PARKWAY	
		GULF BREEZE, FL 32563	
			☐Change
MGMR	CHRISTOPHER SMITH	2940 CORAL STRIP PARKWAY	= Add
		GULF BREEZE, FL 32563	□Remove
			☐ Change
			□ Add
			□Remove
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fective date, if other than the date of filing: $\frac{2/1/20}{1}$			(optio	nal)	
n effective date is listed, the date must be specific and cannot be offer. If the date inserted in this block does not meet the a	prior to date o	of filing or more tha	n 90 days after f	iling.) Pursu	ant to 605.020
cument's effective date on the Department of State's rec	ords.	ititory ming requ	nements, uns		ar ve mada a
record specifies a delayed effective date, but not an effect	tive time, at 1	2:01 a.m. on the	earlier of: (b)	The 90th	day after the
is filed.	_				
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and Ephruani 15 all	ァン				
ated February 15. 200	<u>کی</u> .				
ated February 15 . 2009 Signature of a member or	- 				

Filing Fee: \$25.00