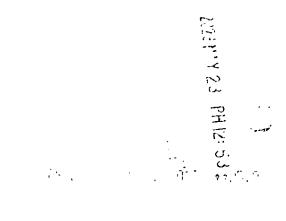
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(F	Requestor's Name)	
(/	Address)	
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((City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
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(1	Document Number)	
Certified Copies	Certificates of	Status
Special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

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COVER LETTER

TO: Registration Se Division of Cor			
NICEVILI SUBJECT:	E BAIT AND TACKLE LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Ryan Langlois		
		Name of Person	
	Niceville Bait and Tackle		
		Firm/Company	
	2437 Duncan Dr	Name of Limited Liability Company Int and fee(s) are submitted for filing, Incerning this matter to the following: Langlois Name of Person He Bait and Tackle Firm/Company Duncan Dr Address City/State and Zip Code glois! (@gmail.com E-mail address: (to be used for future annual report notification) this matter, please call: at (
	-	Address	
	Niceville, FL 32578		
		City/State and Zip Code	
	ryan.langlois1@gmail.com	to be used for future annual report notif	ication)
For further information c	concerning this matter, please ca		
Ryan Langlois			
Name o	f Person		Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

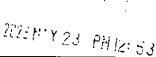
TO:

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

NICEVILLE BAIT AND TACKLE 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 Compar Florida document number L23000169249	ny were filed on 04/05/2023	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liz	ability company here:			
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	4 5 -			
(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 agent and/or the new registered office address here:	e address on our records, <u>enter tl</u>	ne name of the new registered		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	Flor	rida		
	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 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	Ryan Langtois	2437 Duncan Dr	≣ Add
		Niceville, FI. 32578	
			Change
			□Remove
			□Change
			□Add
			□Remove
			Change
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Note: If the	uate inserteu i	han the date date must be sp in this block do on the Departn	of filing: ecific and ca ses not mee	it the applica	to date of filinable statutor	g or more than y filing requ	option 90 days after for the frements, this	nal) iling.) Pursuant date will not b	to 605.0207 (3 e listed as th
he record spec ord is filed.	fies a delayed	l effective date	, but not an	effective tir	ne, at 12:01	a.m. on the	earlier of: (b)	The 90th day	v after the
Dated May 0	5	_		2023					
	16	Signat	unt of a mer	uber or autho	rized represer	ilative ol'a mi	ember		_ .
	11	V / "	υ α ιπει	ms. or aumo	area represer	native of a mt	MOCI		
	V zan Langlois								

Filing Fee: \$25.00