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Special Instructions to	Filing Officer:	

Office Use Only



11/08/23--01014--002 **25.00





COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	T: A	& K	Outdoors	, LLC
			Name of Limited Liability Co	

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:



<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLE	S OF AMENDMEN TO	T	
ARTICLES	5 OF ORGANIZATI OF	ION	
A & K O Hou (Name of the Limited Liability (A Horida	WCS LUC ty Company as it now appears of Limited Liability Company)	on our records.}	
The Articles of Organization for this Limited Liability C Florida document number <u>L2300043080</u>	Sompany were filed on $\underline{0}$	9/15/2023	and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limi</u>	ited liability company here	21	
The new name must be distinguishable and contain the words "Lim-	ited Liability Company," the desi	ignation "LLC" or the abbrevia	tion "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	<u>(ESS)</u>		
			<u>_</u>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	·		VON EZ
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our rec	ords, <u>enter the name of t</u>	hennew registered
Name of New Registered Agent:			<u>~~</u>
New Registered Office Address:	Euror Elsvich	i street address	<u> </u>
	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

.

Title	<u>Name</u>	Address	Type of Action
MGR	Richard A Shaw	108 Gay Gayle Terr	_ Jula
		Duytone Beach, FL 3211	E Remove
• • • •			⊡Change
AUIR	Kaitlyn (Moore	108 Goy Goyle Terr	
		Duyton Beach, FL 32118	🗆 Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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 24th 2023. <u>Haitlyn C. Moevoc</u> Signature of a member or authorized representative of a member Kaitlyn (Moure Typed or printed name of signee