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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Flocked and Loaded, 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:		
Lee Hughes		
Name of Person		
Flocked and Loaded, LLC	****	
Firm/Company		
6392 Raleigh Street, #2801		
Address	_	
Orlando, Florida 32835	SECNLIANA TALLARA	
City/State and Zip Code	VOV	77
Flockedandloaded4u@gmail.com	C)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
E-mail address: (to be used for future annual report notification)	S HE S	101
For further information concerning this matter, please call:	AMIO: 58 OF STATE SEE, FL	* Texastr
Jennifer Haynes at (786) 218-4614		
Name of Person Area Code Daytime Telephone Number	:г	
Enclosed is a check for the following amount:		
(additional copy is enclosed) Certified	cate of Status &	

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

ERTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Flocked and Loaded, LLC						
(<u>Name of the Limited Li</u> Fi	iability Company a lorida Limited Liabi	s it now appe lity Company)	ars on our records	<u>.</u>) (A		
The Articles of Organization for this Limited Liab and assigned Florida document number _L230004	• • •				· · · · · · · · · · · · · · · · · · ·	
This amendment is submitted to amend the follow	ing:					
A. If amending name, enter the new name of the	he limited liabili	ity compan	y here:			
The new name must be distinguishable and contain the words	s "Limited Liability	Company," th	e designation "LLC	or the abbreviation	on "L.L.C."	
Enter new principal offices address, if applicab	ole: <u>(Principal of</u>	Tice uddres:	S MUST BE A S	STREET ADDR	(ESS)	
Enter new mailing address, if applicable:	-			SECTO	2023 NOV	- 57
(Mailing address MAY BE A POST OFFICE BO	- ()(X)			SO SO	<u>_</u>	
B. If amending the registered agent and/or reg registered agent and/or the new registered of			ur records, <u>ent</u>	SECTION SECTIO	them: 58	
Name of New Registered Agent:			_		<u> </u>	
New Registered Office Address:						
		Enter F	lorida street addre.	K.S.		
-			, Fl	orida		
New Registered Agent's Signature, if changing Regi	istered Agent	City		Zip	Code	
I hereby accept the appointment as registered ag provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regi has been notified in writing of this change.	gent and agree t and complete per red agent as pro	rformance o	of my duties, ar Chapter 605, i	id I am familia. F.S. Or, if this a	r with and locument	l is

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member Type of Action Title Name Address 6392 Raleigh Street, #2801, Orlando, FL 32835 X Change (as to title) MGR___ ____Lee A. Hughes 6392 Raleigh Street, #2801, Orlando, FL 32835 X Remove ___ Jennifer G. Haynes D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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 90Hi day is filed. Dated: November 7, 2023 Signature of a member or authorized representative of a member Lee A. Hughes

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being

added or removed from our records:

Filing Fee: \$25.00

Typed or printed name of signee