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## **COVER LETTER**

TO: Registration Se Division of Cor			
	Hotshots O.	( 111	
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Curt	SeydeR Name of Person	
	_	Firm/Company	
	P.O. Box	181283 Address	
	- lallaha	PSSEE FL 32303 City/State and Zip Code	
	E-mail address:	O BENNER LEG to be used for future annual report not	ication)
For further information of	oncerning this matter, please ca	all:	
Curt	Bender	at (LO7 ) LO7 -7 Area Code Daytime	2278 e Telephone Number
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$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:	
Registration		Registration Sec	
Division of C	Ornorations	Division of Cor	norgione

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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· Harehouse	O 6 111		The last
(Name of the Limited L (A F	iability Company as it now apper lorida Limited Liability Company)	ars on our reco <b>nn</b> 4 SEP -9	AM 10: 29
The Articles of Organization for this Limited Liabil		6/28/2 SALLAHAS	OF STATE and essigned
Florida document number <u> </u>	<u>.22</u> .		
This amendment is submitted to amend the following	ıg:		
A. If amending name, enter the new name of the Hotshots OG, LLC. The new name must be distinguishable and contain the words	/	•	iation "L.1C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>		
B. If amending the registered agent and/or regis agent and/or the new registered office address he		records, <u>enter the name of</u>	the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Fl	orida street address	
_		, Florida	
	City	χ	ip 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>	Name	Address	Type of Action
MBR	Perrick J. Guthare	1524 NW Main Blud	🗹 Add
		1524 NW Main Blud. Lake City, 51 32005	□Remove
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effective da e: If the c	te, if other than ate is listed, the date date inserted in th ffective date on th	: must be specific is block does n	e and cannot be pa not meet the app	dicable statutory	or more than 90 day	(optional) vs after filing.) Pursu its, this date will no	ant to 605,020° of be listed as
cord specil filed.	fies a delayed effo	ective date, but	not an effectiv	e time, at 12:01 a	i.m. on the earlier	of: (b) The 90th	day after the
ed	eptember	- 9	. 2029	<u>-/</u> .			
, 	Bryce	Tungle	y by	Cathorized represent	P.G.,	٨)	
		11	~	•			