

H18000060430
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
H210001522263

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To: Division of Corporations
Fax Number : (850)617-6383
From: Account Name : SICONT ENTERPRISES OF AMERICA INC
Account Number : I20160000041
Phone : (407)443-8973
Fax Number : (407)930-2626

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TPNO LLC

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2021 APR 16 AM 10:26

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COVER LETTER

#210001522263

TO: Registration Section
Division of Corporations

SUBJECT: TPNO 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:

DESIREE TORRES

Name of Person

SICONT ENTERPRISES OF AMERICA INC

Firm/Company

13574 VILLAGE PARK DR STE 250

Address

ORLANDO, FL 32837

City/State and Zip Code

sunbiz.sicont@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DESIREE TORRES

at (407) 433-8973

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#210001522

TPNO 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 Company were filed on 03/09/2018 and assigned Florida document number L18000060430

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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 Changing Registered Agent, Signature of New Registered Agent

#210001522263

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MBMR	ALI ANUAR HOSMAN BRUZON	7031 MODERMA WAY	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32822	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBMR	LISSET LOPEZ POMPA	7031 MODERMA WAY	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32822	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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