

L18000211379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

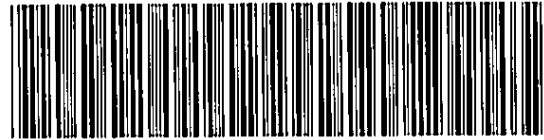
(Document Number)

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9-16-19

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06/03/19--01039--013 \*\*52.50

SECRETARY OF STATE  
ALBANY, NEW YORK  
2019 SEP 16 PM 4:20  
F. H. C. W.

COVER LETTER

TO: Registration Section  
Division of Corporations

SEP 16 PM 4:20  
F 16-11-14

SUBJECT: TENACITY JAX 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:

PENELOPE COWAN  
Name of Person

TENACITY JAX LLC  
Firm/Company

4830 LATIMER RDS  
Address

JACKSONVILLE FL 32257  
City/State and Zip Code

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

For further information concerning this matter, please call:

PENELOPE COWAN at ( 904 ) 517-7544  
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)

ALREADY SENT  
A CHECK FOR \$52.50 THAT WAS CASHED.

MAILING ADDRESS:  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

STREET/COURIER ADDRESS:  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

2018 SEP 16 11:44:20  
STATE OF FLORIDA  
DEPARTMENT OF REVENUE

TENACITY JAX 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 9-5-2018 and assigned  
Florida document number L18000211379.

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: PENELOPE COWAN

New Registered Office Address: 4830 LATIMER RD S  
*Enter Florida street address*

JACKSONVILLE, Florida 32257  
*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.*

Penelope Cowan  
If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
<u>DTR</u>	<u>MICHAEL PETERS</u>	<u>2026 BILS DR</u>	<input type="checkbox"/> Add
		<u>JACKSONVILLE FL 32210</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>DIR</u>	<u>PHILIP LIMBAUGH</u>	<u>5457 101 ST</u>	<input checked="" type="checkbox"/> Add
		<u>JACKSONVILLE FL 32210</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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