

L23000238779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

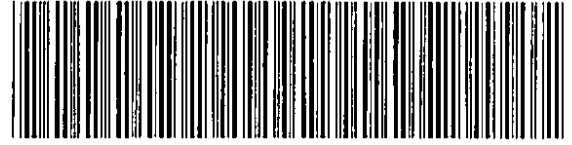
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** TNT DESTIN, LLC, a Florida limited liability company  
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:

Todd Burke  
Name of Person

Burke Law & Title  
Firm/Company

1732 W County Highway 30A, Unit 102C  
Address

Santa Rosa Beach, FL 32459  
City/State and Zip Code

tburke@burkelawandtitle.com  
E-mail address: (to be used for future annual report notification)

2009 Nov 11 PM 3:09

For further information concerning this matter, please call:

Todd Burke at ( 850 ) 622-1992  
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



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>AMBR</u>  | <u>ALMOND ESTATE, LLC</u>  | <u>6521 E 109th Place, Tulsa OK 74133</u>    | <input type="checkbox"/> Add               |
|              |  |  | <input checked="" type="checkbox"/> Remove |
|              |  |  | <input type="checkbox"/> Change            |
| <u>AMBR</u>  | <u>Revocable Inter Vivos Trust of<br/>Nhan P Truong dated September 21, 2017</u> | <u>6521 E 109th Place, Tulsa OK 74133</u>    | <input checked="" type="checkbox"/> Add    |
|              |  |  | <input type="checkbox"/> Remove            |
|              |  |  | <input type="checkbox"/> Change            |
| <u>MGR</u>   | <u>Nhan P. Truong</u>  | <u>6521 E 109th Place, Tulsa OK 74133</u>    | <input checked="" type="checkbox"/> Add    |
|              |  |  | <input type="checkbox"/> Remove            |
|              |  |  | <input type="checkbox"/> Change            |
| <u>MGR</u>   | <u>Mylinh A. Tran</u>  | <u>605 Murphy Road, Colleyville TX 76034</u> | <input checked="" type="checkbox"/> Add    |
|              |  |  | <input type="checkbox"/> Remove            |
|              |  |  | <input type="checkbox"/> Change            |
|              |  |  | <input type="checkbox"/> Add               |
|              |  |  | <input type="checkbox"/> Remove            |
|              |  |  | <input type="checkbox"/> Change            |
|              |  |  | <input type="checkbox"/> Add               |
|              |  |  | <input type="checkbox"/> Remove            |
|              |  |  | <input type="checkbox"/> Change            |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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 July 6, 2023

Handwritten signature

Signature of a member or authorized representative of a member

Todd Burke Authorized Representative
Typed or printed name of signer

Filing Fee: \$25.00