L18000151404

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Enuty Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
L

Office Use Only



200354998602

11/19/20--01009--018 **25.00

FILED
2020 NOV PA PH 12: 13

12/23/20

. COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJEC	2312 TALL	Y HO LLC		
JOBAL	···	Name of Limit	ed Liability Company	
The encl	osed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please re	eturn all correspor	ndence concerning this matter t	o the following:	
		JASON WHITE		
			Name of Person	
		2312 TALLY HO LLC		
			Firm/Company	
		43 ISLAND DR		
			Address	
		EASTPOINT, FL 32328		
			City/State and Zip Code	
		fswhite01@yahoo.com E-mail address: (to	o be used for future annual report notification	ation)
For furth	ner information co	oncerning this matter, please ca		
Stuart W	/hite		850 933-8782	
	Name of	Person	at () Area Code Daytime T	Celephone Number
Enclosed	d is a check for th	e following amount:		
■ \$25	.00 Filing Fee	S30.00 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	<u>s:</u> Section	Street Address: Registration Secti	ion

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

, ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2312 TALLY HO LLC	
(<u>Name of the Limited Liability Company as it now apr</u> (A Florida Limited Liability Compan	ears on our records.) y)
The Articles of Organization for this Limited Liability Company were filed on	06/20/2018 and assigned
lorida document number L18000151404	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	here:
he new name must be distinguishable and contain the words "Limited Liability Company," the	ne designation "L.I.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	202
Principal office address MUST BE A STREET ADDRESS)	
	~ T
	: 3 E
Enter new mailing address, if applicable:	, 🗯 🗇
Mailing address MAY BE A POST OFFICE BOX)	. 7.
	ω
3. If amending the registered agent and/or registered office address on ou agent and/or the new registered office address here:	r records, <u>enter the name of the new regist</u>
Name of New Registered Agent:	
New Registered Office Address: Enter	Florida street address
	Clarida
Circ	, Florida 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 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>	Address	Type of Action
MGR	FREDERICK WHITE	43 ISLAND DR SUITE 2 EASTPOINT, FL 32328	a Add
			□Change
			□Add
			20分 FMED FINED 13 E
			Figures 1
			ω □Remove
			Change
			□Add
			□Remove
			🗆 Change
			□Add
			□Remove
		<u> </u>	□Change
			□ Add
			□Remove
			□ Change

		
		202
		2020 NOV
· · · · · · · · · · · · · · · · · · ·		
		CT)
		Z H P
-		
		ω
	-	
Total and the same of the same	11/16/2020	(optional)
fective date, if other than to 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 605.02
	s block does not meet the applicable statutory filic Department of State's records.	ing requirements, this date will not be listed to
	ctive date, but not an effective time, at 12:01 a.m.	n, on the earlier of: (b) The 90th day after th
is filed.		
, 11/16	2020	
ated	·	
	-flet	
Jo	Signature of a member or authorized representative	

· .

Filing Fee: \$25.00