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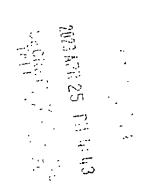
(Requestor's Name)
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COVER LETTER

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CUDINCT.		Y SOLUTIONS BY T&C, LLC	2	
SUBJECT:		Name of Lim	ited Liability Company	.
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		CELESTINO J. ALONSO	JR	
			Name of Person	
				2077 APR 25
			Firm/Company	
		20000 SW 286 ST		72.55
		 	Address	
	Firm/Company 20000 SW 286 ST Address HOMESTEAD, FL 33030 City/State and Zip Code PROPERTYSOLUTIONSBYTC@GMAIL.COM E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: STINO J. ALONSO JR 786 385-6060 at (। । 		
			City/State and Zip Code	
			_	
		E-mail address: (to be used for future annual report notifi	cation)
For further in	iformation c	oncerning this matter, please c	all:	
CELESTING) J. ALONS	O JR		
	Name o	f Person		Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling 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)
	iling Addres		Street Address: Registration Sec	tion
	_	orporations	Division of Corp	
P.C). Box 632	7	The Centre of Ta	
Tal	lahassee, I	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROPERTY SOLUTIONS BY T&C, LLC	
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company we	ere filed on 07/21/2021 and assigned
Florida document number L21000333575	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	y 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)	
_	
	7 : 12
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	1
-	
•	<u>်</u>
B. If amending the registered agent and/or registered office addagent and/or the new registered office address here:	dress on our records, <u>enter the name of the new registerec</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin 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

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	NELLY ALONSO	13255 SW 72 TERR	■ Add
		MIAMI, FL 33183	□Remove
			☐ Change
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inective date, if other than the an effective date is listed, the date mu- lote: If the date inserted in this bl	st be specific and cannot be pri lock does not meet the app	ior to date of filing licable statutory	or more than 90 days a	ifter filing.) Pursu this date will n	iant to 605.0. iot be listed
ocument's effective date on the D	epartment of State's record	ds.		The state will be	
record specifies a delayed effective is filed.	e date, but not an effective	time, at 12:01 a	i.m. on the earlier of	(b) The 90th	ı day after tl
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APRII I	วกวา				
ated APRIL I	. 2023	·			
APRII 1	Signature of a member or au	·			