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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Registration Section Division of Corporations

SUBJECT:	Tampa International Name of Limit	national I ed Liability Company	interpreters LLC
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ndence concerning this matter to	o the following:	
	Maria	Teresa O	vtiz
	Tampa In	ternational J	Interpreters LLC
	6910	Wo Waters	Ave Apt 308
		City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code	
For further information c	E-mail address (to oncerning this matter, please cal		itication)
Maria Name o			19860 ne Telephone Number tawsa@yahoo. Con
Enclosed is a check for th	ne 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:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

Tampa Intern	ational 2021 NOVER AND 1838 110
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on proceeds.) Liability Company) TALL TALL TOP STATE
	MLLANI SSEE FI
The Articles of Organization for this Limited Liability Company Florida document numberLOS_00082.	were filed on <u>August 19, 2005</u> and assigned
Florida document number	333
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	<u>ility company here</u> :
The new name must be distinguishable and contain the words "Limited Liabil	
The new name must be distinguishable and contain the words "Limited Liabit	lity Company," the designation "L.L.C" 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 a agent and/or the new registered office address here:	iddress on our records, <u>enter the name of the new registered</u>
ingent unitary the new registered office dataless dere.	
Name of New Registered Agent:	
	2 11 1101000 0 10 10+ 200
New Registered Office Address: 641(M. Waters Ave Apt 308 Enter Florida street address MPA . Florida 33634 Zip Code
Tar	npa Florida 33634
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre	ee 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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
NA	N/A	N/A	□Add
·	ŕ		□Remove
			□Change
			□Add
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ote: If the date in	isted, the date must iserted in this blo	late of filing: be specific and cannot be prick does not meet the app partment of State's record	licable statu			
record specifies a Lis filed.	delayed effective	date, but not an effective	time, at 12	01 a.m. on the	earlier of: (b) The	e 90th day after the
ated	11/22	21 Signature of a member or au	IA L	Escribative of a fi	L cmber	
		Mari		_ Eresa	Ortiz	

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