(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	, #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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12/31/12--01021--015 **25.00

B. BOSTICK

JAN - 2 2013

EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

TIN CITY, LLC		
	}	
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
	1	L.C. File
		Fictitious Name File
	Ì	Trade/Service Mark
		Merger File
	l	Art. of Amend. File
	į	RA Resignation
	!	Dissolution / Withdrawal 3*
		Annual Report / Reinstatement
		1,25
		Cert. Copy Photo Copy S S S S S S S S S S S S S S S S S S S
	:	Contificate of Cood Standing
		Certificate of Good Standing Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
		Fictitious Owner Search
Signature		Vehicle Search
		Driving Record
Requested by: SETH		UCC 1 or 3 File
12/31/12		UCC 11 Search
Name Date	Time	UCC Retrieval
Walk-In Will Pick Up		Courier

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

TIN CITY, 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:

JOHN N. BRUGGER

Name of Person

FORSYTH & BRUGGER, P.A.

Firm/Company

600 5TH AVE S., STE 207

Address

NAPLES, FL 34102

City/State and Zip Code

JBRUGGER@FORSYTHBRUGGER.COM

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

For further information concerning this matter, please call:

JOHN N. BRUGGER

239, 263-6000

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

lity Company as it now appears la Limited Liability Company)	on our records.)		
y Company were filed on <u>09/0</u>	8/2005	and assig	med
			
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imited liability company here:	:		
words "Limited Liability Company	y," the designation "L	LC" or the ab	breviation
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gistered office address on ou ddress here:	r records, <u>enter ti</u>	ie name of	the new
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Ente	r Florida street addr	22.8	
2/100			
City	, Florida	Zip Code	
	company were filed on 09/0 company were filed on 09/0 company here: words "Limited Liability Company DRESS) gistered office address on ouddress here: Ente	imited liability company here: words "Limited Liability Company," the designation "L DRESS) gistered office address on our records, enter tiddress here: Enter Florida street address, Florida	company were filed on 09/08/2005 and assignation with the designation with the designation with the designation with the above the signature of the signature o

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member Type of Action <u>Title</u> Name | <u>Address</u> Remove Remove Remove Remove

. If	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ted	12/31/2012
	Signature of a member or authorized representative of a member JOHN N BRUGGER
	Typed or printed name of signee Page 3 of 3

Filing Fee: \$25.00

12 DEC 31 AH 10: 55