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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

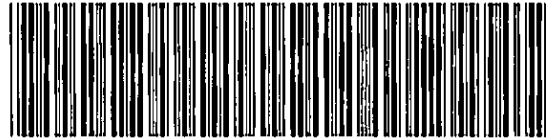
(Business Entity Name)

(Document Number)

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18 JUN 25 AM 11:57
SECRETARY OF STATE
DIVISION OF CORPORATIONS

N COOPER

JUN 27 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TNC Builders, 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:

Timothy Brandt

Name of Person

TNC Builders, LLC

Firm/Company

4929 Yellowstone Dr.

Address

New Port Richey, FL 34655

City/State and Zip Code

tncbuildersllc@gmail.com

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

For further information concerning this matter, please call:

Annette Brandt

727 359-1304
at ()

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

TNC Builders, LLC

The Articles of Organization for this Limited Liability Company were filed on October 13, 2005 and assigned Florida document number L05000100858

A. If amending name, enter the new name of the limited liability company here:

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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

Civ

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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Whitney Pratt	11808 Colony Lakes Blvd.	<input checked="" type="checkbox"/> Add
		New Port Richey, FL 34654	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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10 JUN 25 AM 11:51

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
10 JUN 25 AM 11:57

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.

Dated June 20, 2018

Dorothy Brand
Signature of a member

Signature of a member or authorized representative of a member

Timothy Brandt

Typed or printed name of signee