

A1A REGISTERED AGENT, INC.
Division of Corporations

561-792-8082

206000053449

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H150001156923)))



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Fax Number : (850)617-6383

From: Account Name : A1A REGISTERED AGENT INC.
Account Number : 120090000032
Phone : (561)792-2236
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TALLAHASSEE, FLORIDA

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TON TNT LLC

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T. Bush MAY 13 2015

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H15000156923

TON TNT LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/23/2006 and assigned
Florida document number L06000053449.

This amendment is submitted to amend the following:

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

TONY TNT LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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

City

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 Changing Registered Agent, Signature of New Registered Agent

H15000156923

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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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Dated MAY 8 2015

Gordon Brainer

Signature of a member or authorized representative of a member

GORDON BINECKI

Typed or printed name of signee

Filing Fee: \$25.00

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