L0000093344

(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone	: #)		
	<u></u>	—		
PICK-UP	WAIT	MAIL.		
(Business Entity Name)				
· (Do	cument Number)			
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Certified Copies	_ Certificates	or Status		

Special Instructions to Filing Officer:

L. SELLERS

DEC 1 0 2008

EXAMINER

Office Use Only



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November 13, 2008

ANDREW C. HEDMANN 1855 NW 112 AVENUE, UNIT 187 MIAMI, FL 33172

SUBJECT: TCT3, LLC

Ref. Number: L06000093244

We have received your document for TCT3, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 208A00057111

Leslie Sellers Regulatory Specialist II

Division of Cornerations - P.O. ROY 6397 Tollahasson Florida 39314

COVÈR LETTER

TO: Registration Se Division of Con			
SUBJECT: TCT3, I	LLC		0
		ited Liability Company)	-
•			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Andrew C Hedmann		
	_	(Name of Person)	
	TCT3, LLC		
		(Firm/Company)	-
	11200 nw 25 st suit 125		
		(Address)	
	miami, fl 33172		
		(City/State and Zip Code)	
For further information c	oncerning this matter, please c	all:	
Erica Socarras		at (_786) 205-8058	
(Name of Person) (Area Code & Daytime Telephone Numb		elephone Number)	
Enclosed is a check for the	ne 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)
Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TCT3, LLC		
(<u>Name of the Limited L</u> (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liab	oility Company were filed on Dec 4th, 2008	and assigned
Florida document number L060009324	44	
This amendment is submitted to amend the follow	ring:	
A. If amending name, <u>enter the new name of t</u>	he limited liability company here:	
L.L.C."	the words "Limited Liability Company," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicab		
Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, enter	the name of the new
		08 TALI
Name of New Registered Agent:		Sin De
New Registered Office Address:		
	(Enter Florida street ad, Florida, (City)	dress)
	, Florida (City)	(7in Code)
	(Cny)	Trip Care)

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.

New Registered Agent's Signature, if changing Registered Agent:

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGM	Noordin Lalani	1845 nw 112 ave # 187 Miami,Fl 33172	Add Remove
MGM	Erica Socarras	1845 nw 112 ave # 187 Miami, Fl 33172	Add Remove
•••			Add Remove
			Add Remove
			Add Remove
	141_04444		Add Remove
D. If amen	ding any other information, enter ch	ange(s) here: (Attach additional sheets, if necesso	1ry.)
Dated		·	08 DEC
	Andreu	mber or authorized representative of a member	-9 AM 8
	Ty	ped or printed name of signee Page 2 of 2	AGISTA SECTION AND A SECTION A

Filing Fee: \$25.00