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Certified Copies <u>(1968-97</u>): Ce	rtificates of Status <u>* / * * * * * * * * * * * * * * * * * </u>
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COVER LETTER

Division of Co	rporations					
SUBJECT:	T&G	SINTL, LLC				
	Name of Lim	ited Liability Company				
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	ondence concerning this matter	r to the following:				
		Teresa S. Grinnen				
		Name of Person				
	Firm/Company					
	calle50000@yahoo.com					
	E-mail address: (to be used for future annual report notif	ication)			
For further information of	concerning this matter, please of	eall:				
Tere	esa S. Grinnen	at (305)	607-7230			
Name of Person Area Code & Daytime Telephone Number						
Enclosed is a check for t	he following amount:					
 ✓ \$25.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,			
<u> </u>	Certificate of Status	Certified Copy	Certificate of Status &			
		(additional copy is enclosed) Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

TO:

Registration Section

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

FILED 09 NOV 23 AM II: 21

		T&G INTL,	LLC	ĪΑ	LLAHA	SCHOOL STATE
(Nan	ne of the Limited L (A F	iability Company a Iorida Limited Liab	as it now app ility Compan	oears on our record y)	<u>s.</u>)	SSEE. FLORIDA
The Articles of Organization for	r this Limited Liab	oility Company we	re filed on	November 28,	2007	and assigned
Florida document number			_			
riorida document number	2070001100					
This amendment is submitted to	amend the follow	ving:				
A. If amending name, enter t	he new name of t	he limited liability	v company	<u>here</u> :		
The new name must be distinguis	hable and end with	the words "Limited	Liability Cor	npany," the designat	ion "LLC	" or the abbreviation
"L.L.C."						
Enter new principal offices ac	ldress, if applicab	ole:				
(Principal office address MUS	T BE A STREET	ADDRESS)				
		_				
Enter new mailing address, if	applicable:					
(Mailing address MAY BE A F	OST OFFICE BO	<u>0X)</u>				
		_				
						
B. If amending the register			address of	n our records, <u>en</u>	ter the	name of the new
registered agent and/or the ne	w registered offic	<u>ce address here</u> :				
Name of New Registe	red Agent:			<u> </u>	<u></u>	
New Registered Office	e Address:					
		Enter Florida street address				
				, Florid	la	
			itv			Zin 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 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 amonding 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 **Title Address** Name | PRES Teresa S. Grinnen ☐ Add 510 Falcon Avenue Maimi Spring, FL 33166 ✓ Remove Teresa S. Grinnen MGR ✓ Add 510 Falcon Avenue Remove Miami Spring, FL 33166 MGRM Gildardo Almaraz 510 Falcon Avenue ☐ Add Miami Spring, FL 33166 ∇ Remove ∏ Add Remove \prod Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 19 2009 Dated ____ Signature of a member or authorized representative of a member Teresa S. Grinnen Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00