

LECO0002161

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : ALECO HARALAMBIDES, P.A.
Account Number : I20140000069
Phone : (305) 854-5206
Fax Number : (305) 854-1087

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TC AVEX, LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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5/16/18

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TC AVEX, 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 02/28/2008 and assigned
Florida document number L03000021061

This amendment is submitted to amend the following:

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

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)

6405 NW 36 STREET

MIAMI, FL 33166

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6915 Red Road

Suite 205

Coral Gables, FL 33143

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:

Danny S. Taha

New Registered Office Address:

6915 Red Road, Suite 205

Enter Florida street address

Coral Gables

Florida

33143

City

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.

Signature of New Registered Agent
If Changing Registered Agent, Signature of New Registered Agent

05-14-'18 17:23 FROM-

305-854-1087

T-041 P0003/0004 F-371

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	AFIF CHANOUHA	6405 NW 36 STREET, SUITE 213	☐ Add
		MIAMI, FL 33166	☒ Remove
			☐ Change
MGR	DANNY S. TAHA	6915 Red Road, Suite 205	☒ Add
		Coral Gables, FL 33143	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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