L08000053709

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SECRETARY OF STATE SHARK ANALYSEE, FLORID

T. CLINE

SEP 19 2008

EXAMINER

COVER LETTER

Division of Corp	porations		
SUBJECT: TDCA, L	_LC		0
	(Name of Lim	ited Liability Company)	_
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Tom Batdorf	(Alama of Barrari)	
		(Name of Person)	
	Marco's Pizza		
		(Firm/Company)	
	13636 Lander's Dr		
		(Address)	
	Hudson, FL 34667		
		(City/State and Zip Code)	
For further information co	oncerning this matter, please c	all:	
Tom Batdorf		at (_727) 861-0686	elephone Number)
(Name o	of Person)	(Area Code & Daytime T	سنسد معرفي برائم
Enclosed is a check for th	e following amount:		
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Cortificate Copy (additional copy is enclosed)

MAILING ADDRESS:

...

Registration Section

TO:

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

TDCA, LLC				
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our records.) d Liability Company)			
The Articles of Organization for this Limited Liability Compa	ny were filed on May 30th 2008	and assigned		
Florida document number L08000053709				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited li	ability company here:			
n/a				
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company," the designation	"LLC" or the abbreviation		
Enter new principal offices address, if applicable:	n/a			
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:	n/a			
(Mailing address MAY BE A POST OFFICE BOX)		Series (F)		
		TO CO		
B. If amending the registered agent and/or registered		r the name of the new		
registered agent and/or the new registered office address h	ere:			
Name of New Registered Agent:		<u> </u>		
New Registered Office Address:				
	(Enter Florida street address)			
	, Florida			
	(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 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 Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Tom Batdorf		Add Remove
MGRM	Dawn Batdorf		Add Remove
 			Add Remove
	•		Add Remove
***************************************			_☐ Add ☐ Remove
			Add Remove
D. If amend	ling any other information, enter char		11 HW 81 538 90%
Dated Septe	JonBa	B	
	Tom Batdorf	per or authorized representative of a member	
	тур	ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00