(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
A. LUNT				
OCT - 7 2008				

EXAMINER

Office Use Only



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10/06/08--01012--016 **25.00

COVER LETTER

Division of Cor						
SUBJECT:	TRRSI CNC L (C (Name of Limited Liability Company)					
	(Name of Limited Liability Company)					
The enclosed Articles of Amendment and fee(s) are submitted for filing.						
Please return all correspo	ondence concerning this matter to the following:					
	Alexanber (Name of Person)					
	(Name of Person)					
	TARSI (NC LLC (Firm/Company)					
	(Firm/Company)					
	.7536 //34 LA, ARETAR SECRETAR	į				
	(Address)	•				
	(City/State and Zip Code)	l				
	(City/State and Zip Code))				
For further information of	concerning this matter, please call:					
Alex	TARS! at (927) 906-5576					
(Name of Person) at (727) 906-5576 (Area Code & Daytime Telephone Number)						
Enclosed is a check for t	the following amount:					
\$25.00 Filing Fee	Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	l)				

MAILING ADDRESS: 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

(Name of the Limited Lightlity Company of	a le nove appeare on our records \
(Name of the Limited Liability Company a (A Florida Limited Liabi	
The Articles of Organization for this Limited Liability Company wer	re filed on Aug 06, 2008 and assigned
Florida document number <u> </u>	/
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 end with the words "Limited "L.L.C."	Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	, Z
(Principal office address MUST BE A STREET ADDRESS)	NATE
	OCT OCT
	SSE -6
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	NASS NO
_	SOF 4
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:	address on our records, sixes the name or the nev
Name of New Registered Agent:	$\mathcal{N}^{\mathcal{A}}$
New Registered Office Address:	
	(Enter Florida street address)
·	, Florida
(0	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Mana MGRM = Ma	ger naging Member		
<u>Title</u>	Name	Address	Type of Action
<u>MGR</u> M	Alycin TARSi	199 P	LENUS LA Add Remove 19N/3, MO 63043 US
			Add Remove
d-accelerate de la contract			Add Remove
	- <u></u>		Add Remove
***************************************			SECRETAR SECRETAR SECRETAR SECRETAR SECRETAR
			FLS Add
D. If amendin	ng any other information, enter change	(s) here: (Attach additional st	neets, if necessary.)

	10/2/08,	*	·
<u>-</u>		or authorized representative of a	member
	A/EXANB & Typed o	or printed name of signee	IRST

Page 2 of 2

Filing Fee: \$25.00