L080000093844

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
		Ì		

Office Use Only



000141575070

01/26/09--01002--021 **55.00

NOT THE SUFFICIENCY OF FILING ...

DEPARTMENT OF STATE O

TALLAHASSEE FLORI

JAN 23 PM 4: 25

B. KOHR JAN 2 3 2009

EXAMINER



UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

TIAI	OC, LLC
Filing Evidence	Type of Document
□ Plain/Confirmation Co	Certificate of Status 73
□ Certified Copy	☐ Certificate of Good Standing
	□ Articles Only
	□ All Charter Documents to Include
Retrieval Request	Articles & Amendments
□ Photocopy	☐ Fictitious Name Certificate
☐ Certified Copy	□ Other
NEW FILINGS	AMENDMENTS
Profit	X Amendment
Non Profit	Resignation of RA Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Reports	Foreign
Fictitious Name	Limited Liability
Name Reservation	Reinstatement
Reinstatement	Trademark
	Other

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OS JAN 23 OF STORION

TIALOC, 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	y Company were filed on 10/02/08	and assigned
Florida document number L08000093844		
Toriga document number	 ·	
Mile success to the second of		
This amendment is submitted to amend the following	;	
A. If amending name, enter the new name of the I	imited liability company here:	
TLALOC, LLC.		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	
	·	
Enter new mailing address, if applicable:	·	
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or re-		enter the name of the new
registered agent and/or the new registered office a	ddress here:	
Name of New Registered Agent:		Management
New Registered Office Address:		
	(Enter Florida si	reet address)
	Play	rida
_	(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 ≠ Ma MGRM = N	nager Nanaging Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			- D
			- 13 mm m m
			Add Remove
D. If amen	iding any other information, enter cha	nge(s) here: (Attach additional sheets, if ne	cessary.)
- -			
Dated	JANUARY 23 , 200	nes R. Huley	
	Signature of a mem	JAMES R. HURLEY	

Page 2 of 2

Filing Fee: \$25.00