

LD8000100612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

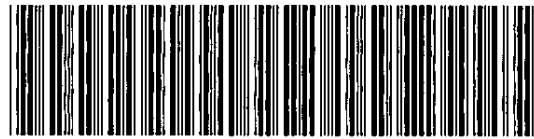
(Business Entity Name)

(Document Number)

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07/24/09--01031--004 **25.00

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2009 AUG -7 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

AUG 10 2009

EXAMINER

1 of 5 Pages

TO: Carolyn Lewis

From: Christian Nelson

Hi Carolyn,

Thanks for your help today. Enclosed is a copy of the Check for \$25.00 that Florida Department of State had cashed. I filled out the Amendment form again. I'm Changing Company name from TD Global Enterprises LLC over to TD Motion LLC.

Regards,

Christian Nelson

561-746-3824

RECEIVED

09 AUG 10 PM 2:12

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

8/10/09

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TD Global Enterprises
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christian Nelson
Name of Person

TD Global (Changing to TD Motion)
Firm/Company

19103 SE Daniel Lane
Address

Taquesta, FL 33469
City/State and Zip Code

cbnelson@nqc.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christian Nelson at (561) 746-3824
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

TD Global L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2009 AUG -7 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 11/7/08 and assigned
Florida document number 37-1574896 LD8000100612

This amendment is submitted to amend the following:

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

TD Motion LLC

The new name must be distinguishable and end with 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)

SAME

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

City

Florida

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.

SAME (Chris Webber)
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 = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated 8/10/2009

Christie Nelson
Signature of a member or authorized representative of a member
Christiane Nelson
Typed or printed name of signee

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2009 AUG -7 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA