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	(Requestor's Name)
	(Address)
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### **COVER LETTER**

TO: Registration Secti Division of Corpo				
SUBJECT: Tee	<u> </u>	Z, LLC red Liability Company	<del></del>	
The enclosed Articles of Art	nendment and fee(s) are subn	nitted for filing.		
Please return all correspond	ence concerning this matter to	o the following:		
	Sax	an B. Reno Name of Person		
	Teez.	2 Pleez		
	<u>6208.</u>	Parcott Ave	·	
	Oksec	Chobee, FL. 3	54974	
	3 KV bo	US amoul. Colo by used for future annual report notif	fication)	
For further information con	cerning this matter, please ca	II:		
Swal	L Reno	at ( <u>863)</u> <u>763-3</u> Area Code Daytime	3921 e 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 of Certified Copy (additional copy is enclosed)	

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee. FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Teez 2	Pleez d Liability Compa	ny as it now appears on our records.	
The Articles of Organization for this Limited Lia Florida document number LOGOOO 81	bility Company		2009_ and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here: SAM	E
The new name must be distinguishable and contain the wo	rds "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	Teez 2 F	Jeez, LLC
(Principal office address MUST BE A STREET	ADDRESS)	uao S. Parr Oneechobee	ott Ave. Fr. 34974
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B	<u>80X)</u>	N/A	
B. If amending the registered agent and/or reagent and/or the new registered office address		nddress on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent:	_Auti	mn G. DeCarl	0
New Registered Office Address:	<u>620</u>	S. Parrott Av	<u>e.                                    </u>
	_Ohe	echobee . Flor	rida 34914

### 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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
<u>mgrm</u>	Frank De Carlo	405 SwandSt.	□Add
		Okeechobee, Fl. 34974	i Remove
			[]Change
MGR	Autumn De Carlo	620 S. Parrott Ave.	<b>X</b> Add
		Okeechobee, Fl 34971	□Remove
			□Change
			🗆 Add
			□Remove
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(If an effe Note:	re date, if other than the date of filing: January 1, 2019 (optional) ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (a fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that it is effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated_	January 2019 Signature of a membrar sotherized representative of a member
	Autumn G. De Carlo Typed or printed name of signee

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Filing Fee: \$25.00