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COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co				
	OPERTIES, LLC			
SUBJECT:	Name of Litt	nited Liability Company		-
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Thomas J. Hernandez			
		Name of Person		
	TAMPA PROPERTY VE	NTURES, LLC		
		Firm/Company		
	4013 W. Santiago St			
		Address		- <u></u>
	Tampa, FL 33629			2023
	·	City/State and Zip Code	<u>.</u>	
	Tampa.Properties@yahoo.c			13
	E-mail address: (to be used for future annual report notific	ation)	-
For further information of	concerning this matter, please c	all:		PH 4: 32
Thomas J. Hernandez		813 494-4090		32 1
Name o	of Person	at ()	Telephone Numb	per
Enclosed is a check for t	he following amount:			
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	Filing Fee, cate of Status & ced Copy tall copy is enclosed)
Mailing Addre	se.	Street Address:		
Registration		Registration Secti	on	
Division of C		Division of Corpo		
P.O. Box 632	4.7	The Centre of Tal	Jahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ten H Apperties, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our rec Liability Company)	cords.)
ne Articles of Organization for this Limited Liability Company orida document number <u>LO9 000 119 216</u> .	were filed on 12/16	and assigned
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	oility company here:	
N/A		
e new name must be distinguishable and contain the words "Limited Liab	lity Company," the designation "l	LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	1	
rincipal office address MUST BE A STREET ADDRESS)		2023
iter new mailing address, if applicable:		3
ailing address MAY BE A POST OFFICE BOX)		2 P 11
dung dadress MAT BE A FOST OF FICE BOAT		15 E
		7 E
If amending the registered agent and/or registered office ent and/or the new registered office address here:	address on our records, <u>en</u>	ter the name of the new regis
	1	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	aress
		Florida Zip Code
	(t iy	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 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 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
			□Add
			□ Remove
			☐ Change
			□Add
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	he date inserte 's effective dat					story filing	requireme	nts, this c	late will r	not be lis	ted a
				2,11112 0 1,440	• • • • • • • • • • • • • • • • • • • •						
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