# U1200000 4324

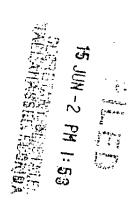
(F	Requestor's Name)
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(H	Business Entity Name)
(1	Document Number)
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JUN 03 2015 J SHIVERS

### **COVER LETTER**

	gistration Sec ision of Corp		, · · · · ·	
SUDIECT.		HOLDINGS LLC		
SUBJECT:		Name of Lim	ited Liability Company	· · · · · ·
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		CHRISTOPHER TOTTEN	٧	
			Name of Person	<del> </del>
	TIN KEYS HOLDINGS LLC  Firm/Company  540 N SR 434 #7401  Address  ALTAMONTE SPRINGS, FL 32714  City/State and Zip Code  ICARMOTORS@ICLOUD.COM  E-mail address: (to be used for future annual report notification)  arther information concerning this matter, please call:  ASTOTTEN  407  864-5628  Area Code  Daytime Telephone Numb  assed is a check for the following amount:  25.00 Filing Fee  \$30.00 Filing Fee \$			
			Firm/Company	
		540 N SR 434 #7401		
			Address	
		ALTAMONTE SPRINGS	Name of Person  Firm/Company  Address  . 32714  City/State and Zip Code  DM  e used for future annual report notification) 407	
			City/State and Zip Code	
		<del>-</del>		
			·	cation)
For further in	nformation co	oncerning this matter, please ca	all:	
CHRIS TO	ITEN		.0, 00.000	
•	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	a check for the	e following amount:		
■ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status &

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

TIN KEYS HOLDINGS LLC	
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)
The Articles of Organization for this Limited Liability Comparing document number <u>L12000004329</u> .	any were filed on 1/09/2012 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited I	liability company here:
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET ADDRESS</u>	2
Enter new mailing address, if applicable:	1809 BIMINI DRIVE
Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32806
Name of New Registered Agent:	5 JUN -2 -
New Registered Office Address:	Enter Florida street address

#### 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.

City

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 for removed from our records:

MGR =	Manager .	,
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SAMUEL GRAPER	1809 BIMINI DRIVE ORLANDO , FL 32806	Add
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			5/	31/2015				要用	w	
	ve date, if other tl		f filing:		1	.1	(optio			(0£ 0303
Note:	ective date is listed, the If the date inserted i ent's effective date of	n this block does	s not meet t	the applica	ble statutory	filing requi	rements, this	date will n	ot be l	isted as
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Dated										
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00