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#### Law Offices

## WILLIAM H. ALBORNOZ, P.A.

901 PONCE DE LEON BOULEVARD SUITE 204 CORAL GABLES, FLORIDA 33134

WILLIAM H. ALBORNOZ

TELEPHONE: 305-444-1741 FACSIMILE: 305-445-4971

August 13, 2020

VIA FEDERAL EXPRESS

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

### RE: Amendment to the Articles of Organization - TNX Rocha LLC

To Whom it May Concern,

Enclosed please find the form for the Amendment to the Articles of Organization for TNX Rocha LLC along with a check to the Florida Department of State in the amount of \$25.00 for the filing fee.

Please note, this filing is time sensitive. If you have any questions please contact our office via our contact information below:

Law Office of William H. Albornoz Attn: Terry Clark 901 Ponce De Leon Blvd Suite 204 Coral Gables, FL 33134

Phone: 305-444-1741

Email: legalassistant@albolaw.com

Sincerely,

Real Estate Paralegal

## **COVER LETTER**

	Cegistration Se Division of Co			
SUBJEC	TNX ROC	HA, LLC		
3013020	• •	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	um all correspo	ondence concerning this matter	to the following:	
		William H. Albomoz		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	<u>_</u>
		William H. Albomoz, PA		
			Firm/Company	
		901 Ponce De Leon Blvd,	Suite 204	
			Address	
		Coral Gables, FL 33134		
			City/State and Zip Code	
		NA E I address:	to be used for future annual report not	ification)
n c.l.	_ !_ C	oncerning this matter, please o		<b></b> ,
		oncerning this matter, please c		
William F	I. Albomoz		305 1741 at ()	ne Telephone Number
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed i	is a check for th	ne following amount:		
<b>■ \$25.0</b> 0	0 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)
<b>.</b>	Jailing Address	•	Street Address:	
Ŕ	egistration S	ection	Registration Se	ection
	ivision of Co		Division of Co The Centre of	rporations Tallahassee
	.O. Box 6321 allahassee F		2415 N. Monro	De Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# ARTICLES OF AMENDMENT TO TO ARTICLES OF ORGANIZATION OF

TNX Rocha, LLC		
(Name of the Limited Liability (A Florida l	Company as it now appears on our records.) .imited Liability Company)	
The Articles of Organization for this Limited Liability Co	mpany were filed on 01/24/2012	and assigned
lorida document number L12000011426	_•	
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limit	ed liability company here:	
he new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRI	ESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered	office address on our records, enter the	name of the new regist
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	···	
	Enter Florida street address	·
	, Floric	
	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 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: | Local Action | Pin 5: 56

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Jaime Alegrett	2255 Glades Road, Suite 324-A	<b>=</b> Add
		Boca Raton, FL 33431	□Remove
			□Change
AMBR	Jonatas Tessari-Da Rocha	ALAMEDA JOAQUIM EUGENIO DE LIMA984	□Add
		APT 144	🖹 Remove
		SAO PAULO 01403-000 BR	Change
AMBR	Jones Da Rocha-Filho	ALAMEDA JOAQUIM EUGENIO DE LIMA984	□Add
		APT 144	<b>≅ Rem</b> ove
		SAO PAULO 01403-000 BR	□Change
AMBR	Alexandra T Da Rocha	ALAMEDA JOAQUIM EUGENIO DE LIMA984	□Add
		APT 144	BRemove
		SAO PAULO 01403-000 BR	
AR	Pasan Accounting	2310 W Waters Avenue	□Add
		Suite D	🖹 Remove
		Tampa, FL 33604	□Change
			□Add
			□Remove
			□Change

_	nding any other information, enter change(s) here: (Attach additional sheets) if necessary.) 5: 56
A	Article V is deleted in its entirety and replaced as follows.
7	The Name and Address of the Manager(s) of the company are:
_	Jaime Alegrett
_	Address: 2255 Glades Road, Suite 324-A, Boca Raton, FL 33431
7	The company is a Manager managed company.
_	
-	
-	
_	
_	
-	
_	
-	
n effi ete:	ive date, if other than the date of filing:
con s fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted_	August 12th 2020
	Mark Market Market

Filing Fee: \$25.00