## K12000021894

(Requestor's Name)
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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2021 JUL 29 PH 12: 21

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## **COVER LETTER**

	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	STEPHEN C. SHEAR			
	<u> </u>	Name of Person		
		Firm/Company		
•	5704 INTERBAY BLVD.			
	<del></del>	Address		
	TAMPA, FL 33611			
	<del></del>	City/State and Zip Code		
	SCSHEAR@GMAIL.COM	ſ		207
	E-mail address: (	to be used for future annual report not	ification)	:: 2 <u>7</u>
For further information	concerning this matter, please c	all:	LATA'S	<u> </u>
DONALD B. LINSKY		813 634-5566 at ()	35. 90. 90.	JUL 29 PH 12
Name (	of Person	Area Code Daytin	ne Telephone Number (1)	2021 JUL 29 PK 12: 21
Enclosed is a check for t	the following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	Status & y

Mailing Address:
Registration Section

Registration Section Division of Corporations

TO:

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

TAYLALENTERPRISES, LLC		
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C clorida document number $\frac{L12000021894}{L12000021894}$	Company were filed on FEBRUARY 14, 2012	and assigned
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limit	ited liability company here:	
he new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	RESS)	
	<del>-</del>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
<ol> <li>If amending the registered agent and/or registered gent and/or the new registered office address here:</li> </ol>	d office address on our records, <u>enter the nar</u>	ne of the new regis
		2021 
Name of New Registered Agent:		<u></u>
New Registered Office Address:	<u></u>	2
	Enter Florida street address , <b>Florid</b> a	P 11
	City	71 Zip Code
	ſ	2

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.

New Registered Agent's Signature, if changing 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	<u>Address</u>	Type of Action
AMBR	STEPHEN C. SHEAR, TRUSTEE	5704 INTERBAY BLVD., TAMPA, FL 33611	□Add
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ective date, if other effective date is list the date insolument's effective	ed, the date must be reted in this block	specific and ca does not mee	nnot be prior to t the applicat		more than 90 days		
cord specifies a de s filed.	layed effective da	te, but not an	effective tim	e, at 12:01 a.m	, on the earlier o	of: (b) The 90t	h day after th
ed <u>Jul</u>	•		2021	ized representati	- va af a manula a		
	2181	iature of a mer		name of signee	4		

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