

# L12000144190

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

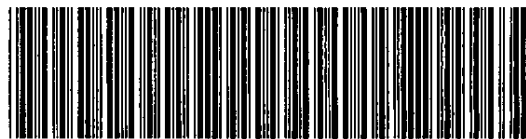
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2013 MAY 15 AM 10:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Oulgan MAY 16 2013

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** T & B HOLDING GROUP, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL ALVAREZ

Name of Person

TAX CARE, INC

Firm/Company

417 CENTER POINTE CIR SUITE 1737

Address

ALTAMONTE SPRINGS, FL 32701

City/State and Zip Code

DANIEL@TAXCAREINC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DANIEL ALVAREZ

Name of Person

at ( 407 ) 774-0861

Area Code & Daytime 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 &  
Certified Copy  
(additional copy is enclosed)

**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**

**FILED**

**2013 MAY 15 AM 10:41**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**T & B HOLDING GROUP, LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/04/2012 and assigned  
Florida document number L12000144190.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

12701 SOUTH JOHN YOUNG PKWY

STE. 215

ORLANDO, FL 32837

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

, Florida

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 608, 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.*

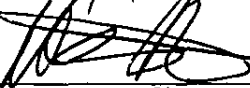
If Changing Registered Agent, Signature of New Registered Agent

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

Dated

5/3/13

\*



Signature of a member or authorized representative of a member

**VITO M. TUOZZOLO GONZALEZ**

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

**FILED**

**2013 MAY 15 AM 10:41**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**