

L12000149067

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 120160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TAMARAC 10200, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
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RECEIVED

2021 FEB 11 PM 4:44

21 FEB 11 AM 8:12

FEB 12 2021
TAMARAC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tamarac 10200, 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:

Neil F. Luria, Chief Restructuring Officer

Name of Person

Firm/Company

425 West New England Avenue, Suite 300

Address

Winter Park, Florida 32789

City/State and Zip Code

nluria@soliccapital.com

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

For further information concerning this matter, please call:

Marlene Duarte

305 714-4361
at ()

Name of Person

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 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**

Tamarac 10200, LLC

21 FEB 11 AM 8:12

(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 November 28, 2012 and assigned Florida document number L12000149067.

This amendment is submitted to amend the following:

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

TAM Winddown LLC

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

Enter new principal offices address, if applicable:

425 West New England Avenue, Suite 300

(Principal office address MUST BE A STREET ADDRESS)

Winter Park, Florida 32789

Attn: Neil F. Luria, Chief Restructuring Officer

Enter new mailing address, if applicable:

425 West New England Avenue, Suite 300

(Mailing address MAY BE A POST OFFICE BOX)

Winter Park, Florida 32789

Attn: Neil F. Luria, Chief Restructuring Officer

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:

Capitol Corporate Services, Inc.

New Registered Office Address:

515 E Park Avenue, 2nd Floor

Enter Florida street address

Tallahassee

Florida 32301

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.

Kim Tadlock

Kim Tadlock, Asst. Sec. on behalf
of Capitol Corporate Services, Inc.

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CHARLES SWEET	1020 Holland Drive, Suite 114	<input checked="" type="checkbox"/> Add
		Boca Raton, Florida 33487	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RAIMUNDO SANTAMARTA	10200 NW 67th Street	<input type="checkbox"/> Add
		TAMARAC, FL 33321	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	REINALDO SANTAMARTA	10200 NW 67th Street	<input type="checkbox"/> Add
		TAMARAC, FL 33321	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated February 11, 2021


Signature of a member or authorized

Signature of a member or authorized representative of a member

Charles Sweet, Manager

Typed or printed name of signer

Filing Fee: \$25.00