## 13000039739

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SLORE TARY OF STANLOR OF CORPORATION

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## **COVER LETTER**

TO:	Registration Se Division of Cor			
CHD IE7		COMPANY LLC		
SUBJEC	- Ii <u></u> -	Name of Lin	nted Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		PABLO O SIMONATTO		
			Name of Person	
		TANNEX COMPANY		
		<del></del>	Firm Company	
		20515 NE 16TH AVE - STE B23		
		·····	Address	
		MIAMI, FL 33179		
		City/State and Zip Code TANNEX.COMPANY@ GMAIL.COM		
		E-mail address: (	to be used for future annual report notifi	ication)
For furth	ner information c	oncerning this matter, please c	all:	
PABLO	O SIMONATT	0	786 616 9556	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed	l is a check for th	he following amount:		
<b>≘</b> \$25.	66 I iling Fee	□ \$30.00 Filing Foc W Certificate of Status	□ \$55 (0) Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed:
	MAIL	ING ADDRESS:	STREET/COURIE	ER ADDRESS;

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TANNEX COMPANY LLC		
( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number L13000038739		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	1	
10	Α	
The new name must be distinguishable and contain the words "Limited Liabil	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	NA	181/2 181/2 1818
		— 738 — 64
Enter new mailing address, if applicable:		<b>3</b> 300
(Mailing address MAY BE A POST OFFICE BOX)	N/A.	œ 🔆
		<u> </u>
B. If amending the registered agent and/or registered of	fice address on our records, e	nter the name of the ne
registered agent and/or the new registered office address here	_	
Nicola (Nicola) Nicola (Nicola)	4 \/ A	
Name of New Registered Agent:	NA	
New Registered Office Address:	Enter Florida street address	
	, Florid	la

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ALDO J LIMARDO	20815 NE 16TH AVE -STE B23	
		MIAMI,FL 33179	<b>⊞</b> Remove
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	07/3/2018		
E <b>ffect</b> If an eff	ve date, if other than the date of filing:	Pursuant to 6t	)5 O 2O 7
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date went's effective date on the Department of State's records.	ill not be lis	sted as
	The state of the s		
ne red The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. o 90th day after the record is filed.	n the earl	ier of
	07/03/2018		
Dated	7		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00