L130000 61325

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COVER LETTER

	Registration Division of C	Séction Corporations	•	
SUBJEC'		RIS1 LLC		
SUBJEC	1;	Name of Lim	ited Liability Company	
The enclo	sed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all corre	spondence concerning this matter	to the following:	
		Chris Walther		
			Name of Person	,
		THD Ventures LLC		
			Firm/Company	
		3030 N. Rocky Point Driv	e, STE 150A	
			Address	
		Tampa, FL, 33607		
			City/State and Zip Code	
		cwalther@telus.net		
		E-mail address: (to be used for future annual report notifi	cation)
For furthe	r informatio	n concerning this matter, please ca	all:	
Chris Wa	lther		587 575-1940	
	Nam	e of Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check fo	r the following amount:		
\$25.0	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)

MAILING ADDRESS:

TO:

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

THECHRIS1 LLC	•	
(Name of the Limited L (A F	iability Company as it now appears on our lorida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liabil Clorida document number L13000061325	ity Company were filed on April 26, 2	and assigned
his amendment is submitted to amend the followir	g:	
If amending name, enter the new name of the	limited liability company here:	
N/A .		
he new name must be distinguishable and contain the words	"Limited Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	: <u>N/A</u>	
Principal office address MUST BE A STREET A	DDRESS)	
	<u></u>	- 20
		-
Inter new mailing address, if applicable:	N/A	Description of the second seco
Mailing address MAY BE A POST OFFICE BOX	Day 1	Win in the
	.	GA G
 If amending the registered agent and/or ageistered agent and/or the new registered office 		ecords, enter the name of the
Name of New Registered Agent:	I/A	
New Registered Office Address:		
	Enter Florida street	address
_		
	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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	BRYSTONE VENTURES LLC	3030 N. Rocky Point Drive, Ste 150	
		Tampa, FL, 33607	■ Remove
			☐ Change
AMBR	THD VENTURES LLC	3030 N. Rocky Point Drive, Ste 150	□ Add
		Tampa, FL, 33607	■ Remove
			Change
MGRM	THD VENTURES LLC	3030 N. Rocky Point Drive, Ste 150	
		Tampa, FL, 33607	□ Remove
			☐ Change
			Add
			Remove
			□ Change
			Add Remove
			GA Add
			Remove
			Change

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Filing Fee: \$25.00