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Special Instructions to Fili	ng Officer:	
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COVER LETTER

	egistration Sec vision of Corp			
elibarze	Tenssource	e LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclose	ed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		Lee Atkinson, Gen . Cou	ınsel	
			Name of Person	
		Tenssurce LLC		
			Firm/Company	
		7624 Bald Cypress Plac	е	
			Address	
		Tampa, Florida 33614		
			City/State and Zip Code	
		nexarhos@aol.com	to be used for future annual report notifi	cation)
For further	information co	oncerning this matter, please co	·	Cutton,
Lee Atkins	son		813 335-6097	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e 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

TenssourceLLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L13000089046	were filed on 6/20/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		56 ≤ S
(Principal office address MUST BE A STREET ADDRESS)	-	JUE
Enter new mailing address, if applicable:	7624 Bald Cypress Place	FILEU TARY OT'S OF CORPOR
(Mailing address MAY BE A POST OFFICE BOX)	Tampa, Florida 33614	2 25 25 25 25 25 25 25 25 25 25 25 25 25
		57 55
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent:		ter the name of the ne
Non-Deciment Office Address		
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 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
AMBR	Nick Stocks	7624 Bald Cypress Place	
		Tampa, Florida 33614	≅ Remove
			□ Change
			□ Add
			□ Remove
			Change
			Remove
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Effective date, if other the	an the date of fill date must be specific a	ing: and cannot be prior t	o date of filing or mo	(optio re than 90 days after 1	nal) filing.) Pursuant to 60)5.02(
Note: If the date inserted in document's effective date of	i this block does no	ot meet the applical	ble statutory filing	requirements, this	date will not be lis	ated a
document seriective date of	n me iseparment o	T State S records.				
he record specifies a d	elaved effective	e date but not	an effective ti	me at 12:01 a	m on the earl	ier (
The 90th day after th			dir circetive til	me, or include	in. on the car	
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Dated		2018 - · - / 	_ ·			
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Filing Fee: \$25.00