L13000104547

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## **COVER LETTER**

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TO:	<b>Registration Section</b>
	Division of Corporation:

T & C POSEY ENTERPRISES, LLC

SUBJECT: \_\_\_\_

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:

AKIL YISRAEL

FOCUS 9 ENTERPRISES LLC

Firm/Company

Name of Person

2728 ENTERPRISE RD STE. 200

Address

ORANGE CITY, FL 32763

City/State and Zip Code

### AYISRAEL@FOCUS9ENTERPRISES.COM

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

For further information concerning this matter, please call:

AKIL YISRAEL		386 259-9900 at ( )	
Name of F	Person		ne 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Se Division of Cou P.O. Box 6327 Tallahassee, FL	rction rporations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee be Street, Suite 810

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

T & C POSEY ENTERPRISES, 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 JULY 24, 2013 and assigned Florida document number <u>L13000104547</u>.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

## Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

### 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, <u>enter the name of the new registered</u> agent <u>and/or the new registered</u> office address here:

Name of New Registered Agent:	TONY C POSEY,	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	210 W STEVENS AVE		
	E	nter Florida street address — — — — —	
	EUSTIS	Florida 32726	
	City	Zip Ciero	
New Registered Agent's Signature, if changing	Registered Agent:	21 22	

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 lide lity company has been notified in writing of this change.

ing 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

,

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AMBR = Authorized Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
				🗆 Add
				🗆 Remove
				□Change
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				🗆 Add
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				Change
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				CRemove
				□Change
				🗆 Add
				🗆 Remove
				Change 🗌

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

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tive date, if other than the date of filing:	(optional)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated		. 2022	
		Signature of a member or authorized representative of a member	
	AKIL YISRAEL		
		Typed or printed name of signee	
		Filing Fee: \$25.00	