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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SHRIFCT: | |

Tiwaz Trading 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:

Jamie Bunkley

Name of Person

**Tax Savers** 

Firm/Company

1300 Enterprise Drive Unit A

Address

Port Charlotte FL 33953

City/State and Zip Code

jamie@taxsaversfl.net

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

For further information concerning this matter, please call:

Jamie Bunkley

941<sub>625-1925</sub>

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/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tiwaz Trading LLC		
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our reco a Limited Liability Company)	ords.)
	Company were filed on August 6, 201	and assigned
Pionda document number	<del></del> ;	
This amendment is submitted to amend the following:	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)  (A Florida Limited Lia	
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable		2013
(Principal office address MUST BE A STREET ADI	DRESS)	SET
Enter new mailing address, if applicable:		3. 3
(Mailing address MAY BE A POST OFFICE BOX)	ailing address, if applicable:	
		M'
	(Name of the Limited Liability Company as it now appears on our records,) (A Florida Limited Liability Company)  les of Organization for this Limited Liability Company were filed on August 6, 2013	
	·	and assigned  ity company here:  ed Liability Company," the designation "LLC" or the abbreviation  ce address on our records, enter the name of the new  Enter Florida street address  Florida
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida si	and assigned  company here:  iability Company," the designation "LLC" or the abbreviation  address on our records, enter the name of the new  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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Title** <u>Name</u> Address **Type of Action Craig Bolles** 2632 N. 38th Avenue **MGRM** Hollywood, FL 33021 Remove **Beatrice Barone** 2632 N. 38th Avenue **MGRM** Hollywood, FL 33021 Remove Remove

. If ar	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ted	Srot 6/1 , 2013 // 1
	Kall Kall
	Signature of a member or authorized representative of a member
	Craig Bolles
	' Typed or printed name of signee

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Filing Fee: \$25.00