13000116803

(Requestor's Name)
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(Business Entity Name)
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COVER LETTER

TO: Registration Se Division of Cor		· ,		
TalDav Ve	ntures, LLC			
SUBJECT:	Name of Lin	uted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Brigette Harms			
		Name of Person		
	Advocate Consulting Lega	al Group, PPLC		
		Firm/Company		
1300 N Westshore Blvd, Ste 220				
	· - ,	Address		
	Tampa, FI. 33607			
		City/State and Zip Code		
	E-mail address: (to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
Brigette Harms		239 213-0066		
Name o	f Person		ne Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	S30.00 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 S	Section	<u>Street Address:</u> Registration Se		
Division of C P.O. Box 632		Division of Co The Centre of T		
Tallahassee, 1			rananassee oe Street. Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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TalDay Ventures, LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited	iny as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited L Florida document number L13000116803	iability Company	were filed on 08/1	19/2013	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company her	<u>·e</u> :	
The new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the de-	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic			er Drive, Apt 1504	
(Principal office address MUST BE A STREET ADDRESS)		West Palm Beach	n, FL 33401	
				 _
Enter new mailing address, if applicable:		1100 South Flagi	er Drive, Apt 1504	
(Mailing address MAY BE A POST OFFICE BOX)		West Palm Beach	n, FL 33401	
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our rec	cords, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:				
New Registered Office Address:	1100 South Fla	agler Drive, Apt 1504	4	
		Enter Florid	da street address	
	West Palm Bea	ach	, Florida _	33401
		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 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>	Name	<u>Address</u>	Type of Action
AMBR	TalDav Holdings, LLC	1100 South Flagler Drive, Apt 1504	
		West Palm Beach, FL 33401	□Remove
			= Change
			□Remove
			□ Change
_			
			□Remove
			□ Change
			□Remove
			□ Change
			□Add
			Remove
			Change
			□Add
			□Remove

	
	
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	e, if other than the date of filing: (optional) te is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0
Note: If the da	ate inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
locument's eff	fective date on the Department of State's records.
record specifi d is filed.	ies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
a is fried.	
	7/16/2120
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ated	//
Dated/	1011 1100
Pated	7/14/2-20 Signature of a member or authorized representative of a member

Filing Fee: \$25.00