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2016 NOV 17 PH 5: 00 SECRETARY OF STATE

K. SALY NOV 18 2016

COVER LETTER

TO: , Registration Division of	n Section Corporations		
	ANAGEMENT, LLC.		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	s of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	Gabriel W. Falbo		
		Name of Person	
	Gabriel W. Falbo, Esq A	ttorney-at-law	
		Firm/Company	
	14502 N. Dale Mabry High	nway, Suite 200	
		Address	
	Tampa, FL 33618		
		City/State and Zip Code	
	gfablo1@tampabay.rr.com		
	E-mail address: (to be used for future annual report notifi	cation)
For further information	on concerning this matter, please ca	all:	
Gabriel W. Falbo		813 334-7398 at ()_	
Nar	ne of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	or the following amount:		
□ \$25.00 Fiting Fee	e ☐ \$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

FIL	LED
ZOIG NOV 17 TALLAHASSEE,	

TJA MANAGEMENT, LLC.

(Name of the Limited Liability Company as it now appears of

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) UK/DA The Articles of Organization for this Limited Liability Company were filed on October 22, 2013 and assigned Florida document number L13000148644 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 "L.L.C." 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida _ City

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>	<u>Address</u>	Type of Action
MGR Dimitrios Tsafatinos	667 Snug Island, Clearwater, FL 33 76,7	Add	
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If an effe Note:	ve date, if other than the date ctive date is listed, the date must be sp f the date inserted in this block dont's effective date on the Department.	ecific and cannot be prior to oes not meet the applicab	date of filing or more than 90 day	(optional) s after filing.) Pursuant to 605.0207 s, this date will not be listed as
	ord specifies a delayed effe 90th day after the record is		n effective time, at 12:	01 a.m. on the earlier of
, Dated _	NOVEMBER 15	, 2016		
	NOVEMBER 15	min		
	Signa	ture of a member of authoriz	ed representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00