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COVER LETTER

TO: Registration Se Division of Con	ection ', porations				
SUBJECT:	TeleVo 1P	s 1-L-C			
SUBJEC1;		ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		Cholas Todisco	0		
	Tel	eVolls LLC Firm/Company		16 I SECR TALLA	
	<u>1723</u> S	Kingc Ave. Address		HAY 31 AHASSEE	
	Brando	City/State and Zip Code	11	AM 9: 02 F STATE FLORIDA	O
	E-mail address:	K & televoips. To be used for future arinual report notif	1000	02 104	
For further information c	oncerning this matter, please ca	all:			
Nicho Name o	las Todisco f Person	at (<u>813</u>) <u>69</u> Area Code Daytime	55 -510 C Telephone Number)	
Enclosed is a check for the	he 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 Certificate of Certified Co (additional cop	of Status &	
MAIL	ING ADDRESS:	STREET/COURI	ER ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Televol	Ps, LLC
(<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L 1300017686</u>].	any were filed on $\frac{12/26/13}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ability company here:
•	
The new name must be distinguishable and contain the words "Limited Li-	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	ALL TABLE
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	

B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address on our records, enter the name of the nevere:
Name of New Registered Agent:	Richard G Baxley 123 S Kings Ave.
New Registered Office Address:	Enter Florida street address
	Brandon, Florida 33511
New Registered Agent's Signature, if changing Registered Age	

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

MGR = Ma AMBR = Au	anager uthorized Member		
<u>l'itle</u>	<u>Name</u>	Address	Type of Action
MBR	Richad & Baxley	1723 S Kings Ave Brandon, FL. 335/1	Add
		1723 S Kings Ave Brandon, FL. 33511	Change
	Stephen Cox	1723 S Kings Auc	Change
LM QQ	Nicholas Todisco	Brandon, Fl. 3351	☐ Remove
TTIPK	1010401W 190431B	1723 S Kings Ave Brandon, Fl. 3351	□ Add□ Remove >C hange
			Add 1
			SECONADO AND SECON
			□ Remove

□ Change

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Filing Fee: \$25.00