## L14000618964

(Requ	estor's Name)		
(Addre	ess)		
(Addre	ess)		
(City/S	State/Zip/Phon	e #)	
PICK-UP	MAIT	MAIL	
(Busin	ess Entity Na	me)	
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to Fil	ing Officer:		

Office Use Only



900261608889

07/14/14--0100S--019 \*\*25.00



## **COVER LETTER**

Division of Co		•	
SUBJECT: TFH	l Deal1, LLC		
		nited Liability Company	
	of Amendment and fee(s) are sub condence concerning this matter	· ·	
	Ross A. Bo	olin	
		Name of Person	
	TFH Deal1		
	500 O'I - I	Firm/Company	
	503 Silverle		·
		Address	
	Dallas, GA		
	topooutomily@	City/State and Zip Code	
	tensawfamily@ E-mail address: (	to be used for future annual report notif	fication)
For further information	concerning this matter, please c	all:	
Ross A. E	Bolin	<sub>at (</sub> 678 <sub>)</sub> 428-2	2920
Name	of Person	Area Code Daytime	e 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

(Prince of the Limited Line West Common of the Line of		
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company we Florida document number <u>L14000018964</u> .	ere filed on February 4, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y company here:	
The new name must be distinguishable and end with the words "Limited Liability	y Company," the designation "LLC" or the a	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 registered agent and/or the new registered office address here:  Name of New Registered Agent:	e address on our records, <u>enter</u>	the name of the new
		<u>ي</u>
New Registered Office Address:	Enter Florida street address	
<del></del>	, Florida	Zin Code:
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete pe accept the obligations of my position as registered agent as pro	rformance of my duties, and I am j	familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Title <u>Name</u> **Address Type of Action** 919 Sunset Cir Ross Adam Bolin **AMRB** \_□ Add Apt 6 ■ Remove Dalton, GA 30720 □ Add \_□ Remove □ Add \_□ Remove ☐ Remove □ Add ☐ Remove

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
E. Effe (The e	ctive date, if other than the date of filing: (optional) effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
the o	date this document is filed by the Florida Department of State)
Date	July 2 2014
Dan	LASX 07/02/2014
	Signature of a member or authorized representative of a member
	Ross A Bolin MGR Tensaw Family Holdings, LLC
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00