440006/109

(Re	questor's Name)
(Ad	dress)
(Ad	dress)
(Cit	y/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bu	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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, -	ice Use Only



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2817 HGY -2 PH 4: 31

J. HARRIS

COVER LETTER

SUBJECT: //	1 FL CC Name of Lim	ited Liability Company	······
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Tyler	lav	
Division of Corporations SUBJECT: Mall UU			
		Firm/Company	
	2451	175 St. W.	
	Palmet	HO, FL, 342	21
	Articles of Amendment and fee(s) are submitted for filing. I all correspondence concerning this matter to the following: The law Name of Person		
	E-mail address: (to be used for future annual report noti	lication)
For further information c	oncerning this matter, please ea	all:	
<i>- Tyl.</i>	er lai	at (<u>941)</u> 970	-0260
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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



017 NOV -2 FR 2

October 18, 2017

TYLER LAV 2451 17TH ST W PALMETTO, FL 34221

SUBJECT: TMFL LLC

Ref. Number: L14000064109

We have received your document for TMFL LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 2 and 3 is missing.

P14000067375

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is P14000067375.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or by your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 017A00021030

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TMFL LC	!C
(Name of the Limited Liability Compa (A Florida Limited I	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	y were filed on $\frac{04/z_1/2\alpha_4}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabile Tenovative Horne Remodeling. The new name must be distinguishable and contain the words "Limited Liabile Liabile Contains the words "Limited Liabile Contains the words "Liabile Contains the word	
The new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	2451 175 St. W.
(Principal office address MUST BE A STREET ADDRESS)	Palme Ho, Fl 34221
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	245/ 17th St. W
B. If amending the registered agent and/or registered of 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 Zip Code
New Designard Agent's Signature if changing Designard Agents	

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>	Address	Type of Action
			Add
			Remove
			☐ Change
			∐ Remove
			☐ Change
			Remove
			Change
			Add
			□ Remove
			Change
			- U Aqa -
			☐ Remove
			Add
			Remove
			☐ Change

	<u></u>	
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this data if at her then the date of filing.		
ctive date, if other than the date of filing: (optional) effective date 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)207
If the date inserted in this block does not meet the applicable statutory filing requirements, this date ment's effective date on the Department of State's records.	will not be listed	J as
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m.	on the earlier	roi
e 90th day after the record is filed.		
10/0- 2017		
d 10/25 2017.	26	
	- - - - - - - - - - - - - - - - - - -	٠.
Signature of a member of authorized representative of a member		٠.
	√3 1	
14/8- LAU		•
Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00