

L14 000 109 257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

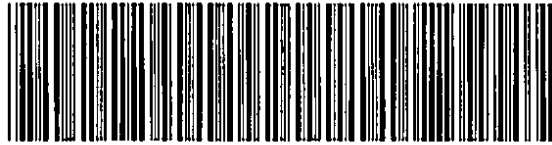
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2021 FEB -5 AM 8:30

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021-01-26 PM 7:10

January 26, 2021

TAMARA DEMPSEY
16485 COLLINS AVE APT 2038
SUNNY ISLES BEACH, FL 33160

SUBJECT: TAMARA RUSH, LLC
Ref. Number: L14000109257

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 421A00001802

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TAMARA
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TAMARA Dempsey
Name of Person

Firm/Company

16485 Collins Ave, # 2038
Address

Sunny Isles Beach, FL, 33160
City/State and Zip Code

tamaramiami Realtor@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TAMARA Dempsey at (954) 815-4465
Name of Person Area Code Daytime Telephone Number

enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

TAMARA RUSH, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

7/10/2014

2014 FEB - 5 AM 8:30

The Articles of Organization for this Limited Liability Company were filed on 02/02/2007 and assigned
Florida document number L 14000109257

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

16485 Collins Ave #2038
Sunny Isles Beach, FL
33160

Enter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

. 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:

TAMARA DEMPSEY

New Registered Office Address:

16485 Collins Ave #2038

Enter Florida street address

Sunny Isles Beach

City

Florida

33160

Zip Code

With 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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

_____ ☐ Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated February 2, 2022

TAMARA DEMPSEY

Typed or printed name of signee