114000/80970

(Re	questor's Name)	
(Ad	ldress)	<u> </u>
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	





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K SALY NUV 21 2018

COVER LETTER

	ition Section of Corporations	. ***	
SUBJECT:	Tranqu'il Name of Lim	Holdings Ll	C
The enclosed Arti	icles of Amendment and fee(s) are sub	omitted for filing.	
Please return all c	orrespondence concerning this matter	to the following:	
	Char	Johnson Name of Person	
		Holdings L	LC_
	4300) whme Rd	
	Madeira	beach, FL 3	3708
	E-mail address (Beach, FL 3 City/State and Zip Code DNN SON OF France to be used for future annual report notiff	juil shores, org
For further inform	nation concerning this matter, please c		
_ Cha	A Johnson Name of Person	at (727) Area Code 391= Daytime	700 Telephone Number
Enclosed is a chec	ck 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

ARTICLES OF ORGANIZATION

OF

18 NOV -5 AH 1: 4.

(Name of the Inmitted Liability Company as it now(appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on $\frac{11/21/2014}{2014}$ and assigned Florida document number $\frac{L14000180970}{2014}$.

This amendment is submitted to amend the following:

A.	If amending	name, enter	the new name	of the limited	liability co	mpany here:

The new name must be distinguishable and contain the words "Limited Liab	ility 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:

13 arbara

rzepierzynsk

New Registered Office Address:

Enter Florida street address

Madeira Beach

33708

nont:

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.

f 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		Address SEPTIAL ED 18 NOV -5 AM 1: 42 Type of Action Add ALLAHASSEE, FLORIDA Add		
<u>Title</u>	<u>Name</u>	Address	St. 22 AH 1: 42	Type of Action
			TALLAHASSEE, FLORIDA	Add
				□ Remove
				Change
			 	Add
				Change
		 		🗆 Add
				□ Remove
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	37 J. L
	ALLAMASSEE, STORIDA
	- CRID
tive date, if other than the date of filing:	(optional)
ffective date is listed, the date must be specific and cannot be p	prior to date of filing or more than 90 days after filing.) Pursuant to 605.0
. If the date inserted in this block does not meet the appearance of State's reco	plicable statutory filing requirements, this date will not be listed ords.
•	
cord specifies a delayed effective date, but	not an effective time, at 12:01 a.m. on the earlie
e 90th day after the record is filed.	not an enective time, at 12.01 a.m. on the earner
10/31 201	18
	/ 1 1
$C \wedge \wedge$	
Signature of a member or	uthorized representative of a member

Page 3 of 3

Filing Fee: \$25.00