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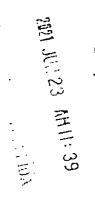
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| Special Instructions to Filing Officer: | |
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Office Use Only



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COVER LETTER

Registration Section Division of Corporations

TO:

| SUBJECT: | TINA #1, LLC | | |
|-------------------------------------|--|---|---|
| | Name of Lir | nited Liability Company | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sul | omitted for filing | |
| Please return all correspo | ndence concerning this matter | to the following: | |
| | LES C. SHIELDS, ESQ. | | |
| | . | Name of Person | |
| | MORRIS & SHIELDS, P. | Α. | |
| | | Firm/Company | |
| | 685 ROYAL PALM BEA | CH BLVD., SUITE 205 | |
| | | Address | |
| | ROYAL PALM BEACH, | FL 33411 | |
| | | City/State and Zip Code | |
| | TERREESHIELDS@AOL. | СОМ | |
| | E-mail address: (| to be used for future annual report not | ification) |
| For further information co | ncerning this matter, please c | all: | |
| LES C. SHIELDS, ESQ. | | 561 793-1200 | |
| Name of | Person | Area Code Daytin | ne Telephone Number |
| Enclosed is a check for the | following amount | | |
| | - | □ 055 00 PW = 0 | |
| ■ 525.00 ruing Fee | □ \$30.00 Filing Fee & Certificate of Status | Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | |
| Mailing Address: Registration Se | | Street Address: | ation |
| Division of Co | | Registration Se Division of Cor | |
| P.O. Box 6327 | | The Centre of T | • |
| Tallahassee, FI | J 32314 | 2415 N. Monro | e Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| TINA #1, LLC | | |
|---|--|---------------------------------------|
| (<u>Name of the Limited Liability Compan</u> (A Florida Limited Li | y as it now appears on our records.) | |
| The Articles of Organization for this Limited Liability Company vi Florida document number <u>L15000004303</u> | | and assigned |
| Tiorida document number | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabil | ity company here: | |
| The new name must be distinguishable and contain the words "Limited Liability Limited Liability | y Company," the designation "LLC" or the a | obreviations"L.L.C." |
| Enter new principal offices address, if applicable: | | <u> </u> |
| (Principal office address MUST BE A STREET ADDRESS) | | 72 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | JH 11: 39 |
| B. If amending the registered agent and/or registered office adapted and/or the new registered office address here: Name of New Registered Agent: | ldress on our records, enter the nam | ne of the new registered |
| | | |
| New Registered Office Address: | Enter Florida street address | |
| | T\ | |
| | , Florida | Zip 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 p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a | erformance of my duties, and I am jovided for in Chapter 605, F.S. Or, | familiar with and if this document is |

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

| at, ending . The mot week a colonity auditorized to it | nanage, <u>enter the ti</u> | ine, name, and | audress of each j | gerson | peing added |
|--|-----------------------------|----------------|-------------------|--------|-------------|
| or removed from our records: | | | • | | |

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | Name | Address | Type of Action |
|--------------|-------------|----------------------------|---------------------|
| MGR | TINA, KAMAL | 117 HERON PARKWAY | |
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| is filed. | ifies a delayed o | effective date, l | out not an ef | fective time, | at 12:01 a. | m. on the ea | rlier of: (b |) The 90 | th day after th |
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Filing Fee: \$25.00