7/13/22, 11:47 AM

Division of Corporations



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Division of Corporations

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COVER LETTER

Division of Co		•	
TCW 208	2, LLC		
	Name of Lin	nited Liability Company	V
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
	oundence concerning this matter		•
	Cheyenne Moseley		
		Name of Person	
,	Legalzoom.com, Inc.		
		Firm/Company	
	101 N Brand Blvd 11th Fl		
		Address	 ,
	Glendale, CA 91203		
	mjs916@gmail.com	City/State and Zip Code	Andrew Street,
For further information	E-mail address: (concerning this matter, please or	to be used for future annual report notifi	cation)
	concerning this matter, piease of		
Cheyenne Moseley		800 773-0888 . at ()	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	LING ADDRESS:	STREET/COURIE	

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TCW 2082, LLC					
(<u>Name of the Limited Limbility Compa</u> (A Florida Limited	ny as it now appears o Liability Company)	n our records.)			
The Articles of Organization for this Limited Liability Company	were filed on 06/25	/2015	and as	signed	
lorida document number L15000110518					
This amendment is submitted to amend the following:			•		
A. If amending name, enter the new name of the limited liab	ility company here	:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the desig	nation "LLC" or the abl	breviation "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					
					_
 If amending the registered agent and/or registered of registered agent and/or the new registered office address here 	fice address on or	or records, enter	the name	of the	ne
Name of New Registered Agent:				2	
New Registered Office Address:			-)22	
New Registered Office Address.	Enter Florida	street address	<u></u>		
		, Florida		-	
	City	, 190104	Zip Code		
lew Registered Agent's Signature, if changing Registered Agent:			· ·	並	J.,
hereby accept the appointment as registered agent and agreences of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performunce of my provided for in Cha	duties, and I am fe pter 605, F.S. Or.	ee to com <mark>j</mark> umiliar wh if this doci	thand unent	
lf Chau	oing Registered Agent	Signature of New Res	istered Age	nt	

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>	Name	<u>Address</u>	Type of Action
AMBR	John P. Scancarella	2196 Residence Cir. Naples, Florida 34105	■ Add
	•		C Remave
			☐ Change
AMBR	David J Stevens	3838 Tamiami Trl N, Ste 402 Naples, Florida 34103	■ Add
			☐ Rentove
			Change
			D Add
			Remove
			☐ Change
			☐ Remove
			☐ Change
			П Велюче
			Change
			D Add
			□ Remove
			☐ Change

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tective in effect ate: If	e date, if other than the date of filing:
cumer	t's effective date on the Department of State's records.
: reco The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 0th day after the record is filed.
ateri	July 12, 2022.
	,
	Signature of a member or authorized representative of a member
*	

Page 3 of 3

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