L15000122546				
(Requestor's Name) (Address) (Address)	000275602750			
(City/State/Zip/Phone #)	08/04/1501016012 **25.00			
Certified Copies Certificates of Status	FILED 15 AUG 12 PH 3: 48 SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Office Use Only	AUG 1 2 2015 T. HAMPTON			

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COVER LETTER

:01 Registration Section Division of Corporations

Hdz Name of Limited Liability Company 101060000 277

SUBJECT:

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

please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: WINTER PARK LISA @ PIPILLA CORP. COM 1158 E-mail address: (to be used for future annual report notification) CISA TPH SOLANAAUE FOOD GROUP FERNANDEE Name of Person **Firm/Company** Address 18 Area Code Daytime Telephone Number FL 32789

Enclosed is a check for the following amount: X \$25.00 Filing Fee Certificate of Status

Certified Copy

Certificate of Status & Certified Copy (additional copy is enclosed)

(additional copy is enclosed)

Name of Person

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STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Corner Circle Tallahassee, FL 32301

MAILING ADDRESS: Registration Section Division of Corporations Tallahassee, FL 32314

P.O. Box 6327

• j.



RECEIVED

15 AUG 12 PH 2:58

FLORIDA DEPARTMENT OF STATE Division of Corporations IALLAHASSEE, FLORIDA

August 5, 2015

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LISA FERNANDEZ 1158 SALANA AVE WINTER PARK, FL 32789

SUBJECT: TPH LONGWOOD,LLC Ref. Number: L15000122546

We have received your document for TPH LONGWOOD,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):

The registered agent must sign accepting the designation.

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) 245-6051.

Tammy Hampton Regulatory Specialist III

Letter Number: 815A00016499

www.sunbiz.org

ARTICLES OF AMENDMENT
то
ARTICLES OF ORGANIZATION
OF

(Name of the Limited 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 7-33-15 and assigned Florida document number 15000122546

This amendment is submitted to amend the following:

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

		J	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviat	ion "L.L.C.	_	
Enter new principal offices address, if applicable:		AUG.	יייבייזי דייבייזי דייבייזי
(Principal office address MUST BE A STREET ADDRESS)			=*
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	רי ויר	, <u> </u>	51 SEC.
Enter new mailing address, if applicable:		မှုမှု	Sec.
(Mailing address MAY BE A POST OFFICE BOX)	<u>555</u>		
		1 00	

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:	LISA	FERN	NNDEZ	
New Registered Office Address:	1158	SOLA	NA AUE	
		Enter Florida str	eet address	
	WINTER 1	PARK	, Florida	32789
	с с	'ity		Zip Code

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.

Registered Agent, Signature of New Regist

Page 1 of 3

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

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	<u>itle</u>	N	ame		Address 1158 SOLANA LUE WINTER PARK FL ³²	Type of Action
12	<u>OC</u>	$O_{}$	RNIEL	GETTINGS	WINTER MARK FL	Add
						Remove
					1158 SOLAUS AUE	Change
m	\$1L_	Ls	S FER	MANNOEZ	1158 SOLANA SUE WINTER PARK R 32	Add
						Remove
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SECRETARY OF STATE

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Filing Fee: \$25.00

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PH 3: 48

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