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## **COVER LETTER**

TO: Registration S  Division of Co	Section orporations		
TAZMAN SUBJECT:	IIC PROPERTY PROPERTY S	EVICES OF TAMPA, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	John J. Agliano		
		Name of Person	
	Bajo Cuva Cohen Turkel,	P.A.	
	·	Firm/Company	<u> </u>
	100 N. Tampa Street, Suite	e 1900	
		Address	
	Tampa, Florida 33602		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	john.agliano@bajocuva.com	n to be used for future annual report notifi	
For further information	concerning this matter, please concerning this matter,	·	cation)
John J. Agliano		813 868-6171	
Name	of Person		Telephone Number
Enclosed is a check 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 OF

TAZMANIC PROPERTY PROPERTY SEVICES OF TAMPA, LLC (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 October 19, 2015 and assigned Florida document number L15000177117 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TAZMANIC PROPERTY SERVICES OF TAMPA, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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:

## New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Enter Florida street address

, Florida

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 = M $AMBR = A$	anager uthorized Member		
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