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	IT MAIL
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COVER LETTER

TO: Registration Section Division of Corporations

TGunther Group, LLC

SUBJECT: _

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

	Tim Gunther				
		Name of Person	~···		
	TGunther Group, LLC				
		Firm/Company			
	203 N. 2nd Street				
		Address			
	Fort Pierce, FL 34950			2023 SE: IALL	
		City/State and Zip Code	<u> </u>		
	im@tgunthergroup.com	to be used for future annual report notif	(cation)		1
For further information c	oncerning this matter, please c				
Tim Gunther		321 246-5085 at ()		-0 <u>-</u>	
Name 0	i' Person		Telephone Number	r	
Enclosed is a check for th	ne following amount:				
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

This amendment is submitted to amend the following:

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

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)	203 N. 2nd Street	202 212	
	Fort Pierce, FL 34950		
	· · · · · · · · · · · · · · · · · · ·	•	. <u> </u>
		·	
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BON)</u>	203 N. 2nd Street		
	Fort Pierce, FL 34950		2
		ີ 🗋	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:	TGunther Group, LLC	
New Registered Office Address:	203 N. 2nd Street	
	Ente	r Florida street address
	Fon Pierce	. Florida 34950
	City	Zip Code

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

Thereby 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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Champing 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

<u>Title</u>	Name	Address	Type of Action
			[] Add
			_ 🗆 Remove
			Change
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			🗆 Remove
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D. If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)
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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

January 16 Dated	2023	M	2023	
	Signature of a member or authorized representative of a member	``		·
Timothy Gunther				Г П
	Typed or printed name of signee	- Geo	۲. هر	