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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

TANCENDES INVESTMENT HOLDING LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

PALMA, ERIK L.
Name of Person
TANCENDES INVESTMENT HOLDING LLC
Firm/Company
5040 NW 7TH ST, SUITE 690
Address
MIAMIM FL 33126
City/State and Zip Code
eriklpalma@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andres	: Hu	urtac	lo
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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

□ \$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

TANCENDES INVESTMENT HOLDING LLC

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

(A Florida Lillined Liabi	my Company)	
The Articles of Organization for this Limited Liability Company were Florida document number <u>L16000060001</u>	re filed on 03/24/2016	and assigned
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 end with the words "Limited Liability	Company," the designation "LLC" or the	abbreviation "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)		16 Ju
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on our records, enter	the name of the new
Name of New Registered Agent:	·····	SIAI D
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
No. Pariston I Arrest Charles III have been been a	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to	o not in this connects. I fouthou as	was to someth with the
provisions of all statutes relative to the proper and complete per	1 1	

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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M AMBR = A	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	PALMA, ERIK L.	5040 NW 7TH ST SUITE	690 _{Add}
		MIAMI, FL 33126	Remove
			Add
			□ Remove
	<u> </u>		
			Remove
			SSEE, FLORIDA
			□ Add
			□ Remove
			Remove

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ective date, if other than the dat	e of filing:(optio	nal)
effective date must be specific, cannot be	prior to date of receipt or filed date and cannot be more than 90 days aft	er
ffective date must be specific, cannot be late this document is filed by the Florida	prior to date of receipt or filed date and cannot be more than 90 days aft	er
effective date must be specific, cannot be date this document is filed by the Florida ed MAY 3RD	prior to date of receipt or filed date and cannot be more than 90 days aft Department of State)	er
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effective date must be specific, cannot be date this document is filed by the Florida ed MAY 3RD	prior to date of receipt or filed date and cannot be more than 90 days aft Department of State) 2016 nature of a member or authorized representative of a member	

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