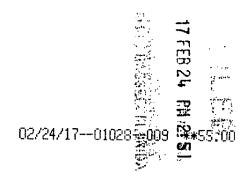
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PICK-UP	WAIT	MAIL
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

ΓΟ: Registration Se Division of Cor	ction porations		
SUBJECT:	Tomby LLC	·	
	Name of Limite	d Liability Company	
The enclosed Articles of	Amendment and fee(s) are subm	itted for filing.	
Please return all correspo	ndence concerning this matter to	the following:	
	NIC D	īvis .	
		Name of Person	· .
	<del>-</del>	Firm/Company	· · · · · · · · · · · · · · · · · · ·
	2956 Jun	per Lane  Address	
	Davis	, FL 3333	<u>)</u>
	Pla Davis E-mail address: (to	City/State and Zip Code  Ocmal: Com be used for, future annual report notifi	cation)
For further information of	oncerning this matter, please call		,
Name o	f Person	at ()	Telephone Number
Enclosed is a check for th	· e following amount:	·	
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	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

Tomboy L.L	C
(Name of the Limit d Liability C (A Florida Lin	Company as it now appears on our records.) nited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document number L14565669.	spany were filed on $\frac{405}{9016}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l liability company here:
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2986 Junior Lane
(Principal office address MUST BE A STREET ADDRES	Davie FL 33330
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2956 Jungoer Lane Davie, FC 33330
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	s here:
Name of New Registered Agent:	
New Registered Office Address:	le Liniper Lane  Enter Florida street address
Do	Vie, Florida 33330
	City 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.

If Changing Registered Agent, Signature of New Registered Agent

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 **Title** <u>Name</u> <u>Address</u> Type of Action □ Add ☐ Remove □ Add ☐ Remove ☐ Change Change ☐ Remove □ Change □ Remove ☐ Change □ Add ☐ Remove ☐ Change

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Filing Fee: \$25.00