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(Re	questor's Name)	
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DA)	dress)	<u> </u>
(Cit	y/State/Zip/Phone #	<i>f</i> )
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
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### **COVER LETTER**

Division of Cor	porations				
subject: 14 <u>2</u>	TSB.LLC				
3000LC1	Name of Lim	ited Liability Company			
The enclosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Michael Cn	Norrir			
		Name of Person			
		1" ()			
		Firm/Company			
	P.O. Box 248	Address	<del>.</del>		
	Daytona Beach	City/State and Zip Code			
	- romacrisanesan	is (O) anl. Com			
	E-mail address: (	to be used for future annual report notific	eation)	705 C	
For further information co	oncerning this matter, please ca	ill:	7	10 4	
Michael CM	lorris	at (386) 235-8  Area Code Daytime	625	2024 JAN 72 PH 3: 34 0525 - 10 1 325 STATE	
Name of	f Person	Area Code Daytime	Telephone Number	元。 200 21 20 21 20 21 20 21 21 21 21 21 21 21 21 21 21 21 21 21	
				EST 3	لمدية
Enclosed is a check for th	ne following amount:		,	72 A	
☐ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate of Certified Cop (additional copy	Fee, Status &	

TO:

Registration Section

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
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 Limi	ted Liability Company as it now appears or (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited L	iability Company were filed on	and assigned
Florida document number	·	
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	f the limited liability company here:	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the desig	nation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applic	eable:	
(Principal office address MUST BE A STREE	T ADDRESS)	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	. 72
B. If amending the registered agent and/or agent and/or the new registered office addre		rds. enter the name of the new registe
Name of New Registered Agent:	Michael C Morris	
New Registered Office Address:	142 W International Enter Florida	Speedway Biturd w
	Daytona Beach	Florida 32114 Zip Code

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

1117 TSR 116

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.

Mull C Mom

If Changing 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Sandra F Morris	P.O. BOX 248	🗆 Add
		Daytona Beach, FL 32115	XRemove
			□Change
MGR	Michael C Mocris	P.O. Box 248	🕱 Add
		Daytona Beach, FL 32115	🗆 Remove
			Change
			□ Add
			Remove
			SET Change  Change  Change
			Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

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					2 <b>924 J</b>
					2024 JAN Z
					2024 JAN 22 P
Effective date, if other	than the date of filing	g:		(optional)	7 PH 3
f an effective date is listed, <b>Note:</b> If the date inserte	than the date of filing the date must be specific and d in this block does not n e on the Department of S	l cannot be prior to da neet the applicable	e of filing or more than statutory filing requi	(optional) 90 days after filing, rements, this date	7 PH 3
fan effective date is listed.  Note: If the date inserte document's effective dat ne record specifies a	the date must be specific and d in this block does not n	l cannot be prior to da neet the applicable state's records.		90 days after filing. rements, this date	Pursuant to 605/20 will not be listed a
fan effective date is listed.  Note: If the date inserte document's effective dat the record specifies at the 90th day afte the patent of the 90th day after the 90th	the date must be specific and d in this block does not not not on the Department of S a delayed effective drive record is filed.	I cannot be prior to daineet the applicable state's records.  date, but not an	effective time, a	90 days after filing, rements, this date at 12:01 a.m.	Pursuant to 605/20 will not be listed a
If an effective date is listed.  Note: If the date inserte document's effective date in the date in the date in the document's effective date in the second specifies at the 90th day afte dated.  Dated	the date must be specific and d in this block does not n e on the Department of S a delayed effective drive record is filed.	I cannot be prior to daineet the applicable state's records.  date, but not an	effective time, a	90 days after filing, rements, this date at 12:01 a.m.	Pursuant to 605/20 will not be listed a

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