L16000203676

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	
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COVER LETTER

	of North Florida LLC		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Sherry Dee Harper Gonyo	n	
		Name of Person	
	TunersInc of North Florida	a LLC	
		Firm/Company	
	164 College Drive		
		Address	
	Orange Park, FL 32065		
		City/State and Zip Code	
	sherry.tunersinc@gmail.com	m to be used for future annual report noti	
E - C-st - '- Ei		•	neation)
ror turtner information	concerning this matter, please c	an:	
James A. H. Gonyon		904 449-1297 at ()	
Name	of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
	_	F) 665.00 FH	C czanamii, n
□ \$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 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

TunersInc of North Florida LLC

(Name of the Lim	ited Liability Company as it now appears on or (A Florida Limited Liability Company)	ir records.)
The Articles of Organization for this Limited I Florida document number L16000203676	Liability Company were filed on November	er 4, 2016 and assigned
This amendment is submitted to amend the fol	llowing:	
A. If amending name, enter the new name	of the limited liability company here:	
he new name must be distinguishable and contain the	- , , , , , ,	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE	ET ADDRESS)	<u></u>
		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	E POV	
Mulling address MAT BE A FOST OFFICE	<u> </u>	
		170
		777 777 860
3. If amending the registered agent and/or		s, enter the name of the new register
gent and/or the new registered office addr	ess nere:	, -
Name of New Registered Agent:	Sherry Dee Harper Gonyon	
New Registered Office Address:	164 College Drive	<u> </u>
	Enter Florida stre	et address
	Orange Park	32065

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Address	Type of Action
MGR	James A. H. Gonyon	164 College Drive	□Add
		Orange Park, FL 32065	□Remove
AMBR Sherry Dee Harper Gonyon	164 College Drive	\ _Add	
	Orange Park, FL 32065	□Remove	
			■ Change
MGR	MGR Sherry Dee Harper Gonyon	164 College Drive	≣ Add
		Orange Park, FL 32065	□Remove
			□Change
AMBR	AMBR James A. H. Gonyon	164 College Drive	
	Orange Park, FL 32065	□Remove	
		□Change	
		· · · · · · · · · · · · · · · · · · ·	□Add
		🗆 Remove	
		☐ Change	
			□Add
		 	□Remove
			□Change

Dasicany S	witching roles for James from Manager to Authorized Member and Sherry from
Authorized	Member to Manager.
-	
	
	February 2, 2021
ective date, i effective date i	fother than the date of filing: (optional) s listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (
te: If the date	inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t tive date on the Department of State's records.
	A Commence of Marc Direction
	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
s filed.	
February l	0 2021
	1/10.1111 (20)

Filing Fee: \$25.00