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J. HARRIS

COVER LETTER

TO:	Registration Se Division of Cor			
		AGEMENT, LLC		
SUBJE	СТ:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	C	
		E. DAVID BENSADON	w to make mig.	
			Name of Person	
		TYX MANAGEMENT, I.	LC	
			Firm/Company	
		11550 INTERCHANGE C	IR N	
		•	Address	
		MIRAMAR, FL 33025		
		edbensadon@gmail.com	City/State and Zip Code	
For furt	her information co	E-mail address: (oncerning this matter, please ca	to be used for future annual report notifi all:	eation)
	ID BENSADON	-	786 558-2233	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclose	d is a check for th	e 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 Beilding
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TYX MANAGEMENT, LLC. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{2/2/17}{1}$ _____ and assigned Florida document number L17000027062 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

_, Florida _

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	E DAVID BENSADON	11550 INTERCHANGE CIR N	□ Add
-		MIRAMAR, FL 33025	□ Remove
			☐ Change
MGR	DANNY TUATY	11550 INTERCHANGE CIR N	
		MIRAMAR, FL 33025	□ Remove
			Change
MGR	DAVID TUATY	11550 INTERCHANGE CIR N	≅ Add
		MIRAMAR, FL 33025	□ Remove
			□ Change
MGR	GAY TUATY BENSADON	11550 INTERCHANGE CIR N	= Add
		MIRAMAR, FL 33025	
			Change
			Add All All All All All All All All All
			SS Change S Control of the Control o
		·	Remove

. 11 4111	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Note:	ive date, if other than the date of filing:	0207 (3)6 d as the
the red	cord specifies a delayed effective date but not an effective time, at 12:01 a.m. on the earlieged 90th day after the record is filed.	r of:
Dated	Ly 12017	
	J) Duns Es E	9817
	Gignature of a member or authorized representative of a member E DAUD BENDARY	
	Typed or printed name of signee	-
	Page 3 of 3	1 12

Filing Fee: \$25.00