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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number: I20010000078 : (407)843-8880 Phone

: (407)244-5690 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Tucker thon e

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COVER LETTER

	Registration Division of C				
STIP TOO		S FLORIDA, LLC		;	
SUBJEC	Name of Limited Liability Company				
The enclo	osed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Plcase ret	turn all corres	pondence concerning this matter	to the following:		
		Tucker J. Thoni			
	Name of Person				
GrayRobinson, P.A.					
			Firm/Company	<u></u> -	
301 E. Pine Street, Suite #1400				<u>_</u>	
Address					
Orlando, FL 32801					
City/State and Zip Code tucker.thoni@gray-robinson.com					
			to be used for future annual report not	ification)	
For furthe	r information	concerning this matter, please o	ali:	•	
Tucker J.	Thoni		407 843-8880 at ()		
Name of Person		of Person		ne Telephone Number	
Enclosed	is a check for	the following amount:			
□ \$25.0	0 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
F I F	Mailing Addr Registration Division of P.O. Box 63 Fallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co. The Centre of 2415 N. Monro Tallahassec, FI	rporations Fallahassee be Street, Suite 810	

r. N. Marka State and Carlo Ca

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOU	20A	FI	∩RM\∆	L, LLC
* ~~~		. ~	$\alpha \alpha $, DDC

(Name of the Limited Liabil			
(A Florid	is Limited Liability Co	ompany)	

	(2011 <u>;</u>	
The Articles of Organization for this Limited I	iability Company were fi	led on February 17, 2017	and assigned
Florida document number L17000036060	<u> </u>		
This amendment is submitted to amend the fol-	lowing:		
A. If amending name, enter the new name of	of the limited liability con	прапу <u>ћеге</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Comp	pany," the designation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if applie	cable:	_	
(Principal office address MUST BE A STREI	ET ADDRESS)		
			÷ 14
			1
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		; ^
B. If amending the registered agent and/or agent and/or the new registered office addre		on our records, <u>enter the nan</u>	ne of the new registe
Name of New Registered Agent:	Tucker J. Thoni		
New Registered Office Address:	301 E. Pinc Street, Suite	± #1400	
		Enter Florida street address	
	Orlando	, Florida ³³	2801
	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 a 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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being at or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	David Nerland	2910 Kerry Forest Pkwy, Suite D4-363	
		Tallahassee, FL 32309	■Remove
			Change
MGR	Landsouth Management Company, LLC	2910 Kerry Forest Pkwy, Suite D4-363	■Add
		Tallahassee, FL 32309	□ Remove
	•		□Change
			DAdd: ;
			Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
		·	□ Change
			□ Add
			□Remove
			Change