L17000043409

(Re	equestor's Name)		
(Ad	ddress)		
(Ad	ddress)		
(Ci	ity/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Nan	ne)	
(Document Number)			
Certified Copies Certificates of Status		of Status	
Special Instructions to	Filing Officer:		

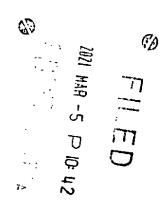
Office Use Only

04/26/2021 So Co



100361060931

03/05/21--01027--026 **25.00



COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	CT:	Gary Winth	NOPPE ENTERPRISES	LLC
The enc	closed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please i	return all correspon	dence concerning this matter	to the following:	
		D	Name of Person	
		Gary W	Vinthorle Enterprise	5, LLC
		821 Bu	CKSKIN CT	
		Englewood	Od, FL 39223 Ctty/State and Zip Code	
			dany duvange. Com	
For furt	her information co	neerning this matter, please ea	all:	
	Daniel Do	ANCAN Person	at (<u>941) </u>	- 1815 e Telephone Nui té
Enclose	ed is a check for the	following amount:		IDI MAR
₹ / \$25	5,00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Food Certificate of Status & Certified Copy U (additional copy is gelosed)
				. 42
	Mailing Address: Registration So Division of Co P.O. Box 6327	ection rporations	Street Address: Registration Se Division of Cor The Centre of T	porations allahassee
	Tallahassee, F	L 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	THORFE ENTERPRISES, LLC
(<u>Name of the Limited Liah</u> (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number <u>L1700004 3409</u>	Company were filed on 02/27/2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADI	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, enter the name of the new registered
Name of New Registered Agent:	D M
New Registered Office Address:	Enter Florida street address
	Florida
	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

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>	Name	Address	Type of Action
AMBR	David Tomchinsky	505 W Dearborn St Englewood, FL 34223	
		Englewood, FL 34223	□Remove
			□Change
			□ Add
			□Remove
		<u> </u>	□Change
	 		□ Add
		20	Remo v e
			They a
		ह्याँ 7: •	Remove
			□Change
		······································	□Add
			Петюvе
		 	☐ Change
	 		□ Add
			□ Rепюче
			□Change

Page 2 of 3

. If amending any other information, enter change(s) here: (Attach additional she	ets, if necessary.)	
	<u> </u>	
		
		
 		
	· · · · · · · · · · · · · · · · · · ·	
		<u>. </u>
	<u> </u>	≅ ——
	\$. <u></u>	
	;	<u></u>
2000 - 2 - 1 - 10 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	•	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 5 Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	00 days after filing.) Pr	
the record specifies a delayed effective date, but not an effective time, at The 90th day after the record is filed.	t 12:01 a.m. on	the earlier of:
Dated Match 2 2021		
1 201 20	abur	
Signature of a member or authorized representative of a men Daniel Duncan Typed or printed name of signee	шсг	

Page 3 of 3

Filing Fee: \$25.00