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SECRETARY OF STATE

K. SALY JUN 1 4 2017

COVER LETTER

TO: Registration So Division of Cor		P	
TENDERF SUBJECT:	FOOT NC, LLC.		
	Name of Lim	ited Liability Company	
		•	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	DENNIS H. DAVIS III		
		Name of Person	-
	TENDERFOOT NC, LLC		
		Firm/Company	
	1801 8TH AVE. WEST S	UITE M8	
		Address	
	PALMETTO, FLORIDA	34221	
		City/State and Zip Code	
	Dennishdavis3@msn.com		(C)(4) () (
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	•
Dennis H. Davis, III		941 725-1901 at ()	
Name c	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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 Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

10	~
ARTICLES OF ORC	ANIZATION / //
OF	20 16 6
Or	SANIZATION 2017 WW 13 PM 1: 43 it now appears on our records.)
	~ ~ /3 pu
TENDERFOOT NC, LLC.	TALL CRETAR
(Name of the Limited Liability Company as	it now appears on our records.
(A Florida Limited Liabili	ty Company)
The Adiaba of Organization for this Limited Linking Comment	02/20/2017
The Articles of Organization for this Limited Liability Company were	filed on ozración and assigned
Florida document number 117000045381	
	·
This amendment is submitted to amend the following:	
A 16	
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 Co	ompany," the designation "LLC" or the abbreviation "L.L.C."
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 nev
registered agent and/or the new registered office address here:	address on our records, enter the name of the new
regional and and and and the real political and and the state of the s	
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

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	ANN M. REED	4830 14TH AVE. EAST BON. FL. 34708	
	;		□ Remove
			Change
MGR	WILLIAM F. RICE		
		3716 COCONUT TERRACE BOON, PL. 34210	■ Remove
	·		Change
			Remover Charles Change
	<u> </u>		
			OR FREMOVE
			Change
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cument's effective date on	ne Department	of State's reco	rus.			
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Filing Fee: \$25.00