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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tanicha's Vivtual OFFice LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Taricha Bottley Name of Person
Tanicha Syrtual Office LCC
6207 62nd Ter E
Palmette FL 34221
Tancha D. Tanichas Virtual Office. con
For further information concerning this matter, please call:
Name of Person
Enclosed is a check for the following amount:
\$25.00 Filing Fee Salo.00 Filing Fee & Salo.00 Filing Fee & Salo.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) 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

(Name of the Lim	mited Liability Company as it now appears on our records. (A Florida Limited Liability Company)
The Articles of Organization for this Limited I Florida document number $\boxed{-170000}$	
This amendment is submitted to amend the fol	ollowing:
A. If amending name, <u>enter the new name</u>	isi 느 🗂
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 appli	licable:
(Principal office address MUST BE A STRE	EET ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE	<u>E BOX)</u>
B. If amending the registered agent and registered agent and/or the new registered of	d/or registered office address on our records, <u>enter the name of the new</u> office address here:
Name of New Registered Agent:	Janicha Bottley
New Registered Office Address:	6207 62nd Ter E
	Palmetto Florida 3421 Cuy Zup Code

New Registered Agent's Signature, if changing Registered Agent;

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 A or removed fro	uthorized Person(s) authorized to man our records:	rage, enter the title, name, and address of each	ch person being added
MGR = Man AMBR = Auti	ager horized Member		
Title	Name	Address	Type of Action
MGK-	I Con 1 cha Bottley	10207 62nd Ter-E Palme HoFL 34221	Ndd
			□ Remove
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	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	DIVISION OF	
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	CONCECUENT SECTION SEC	
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Effectiv	re date, if other than the date of filing:	
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed not seffective date on the Department of State's records.	1207 Las
arcune.	in seriective date on the Department of State's records.	
ne reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier	- ol
The 9	90th day after the record is filed.	
Dated _	July 24th 2017.	
	Signature of a member or authorized repropentative of a member	
	Organization of a member of a member	
	lancha Bottley	

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Filing Fee: \$25.00