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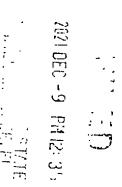
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations		,	
SUBJECT: FINANC	Name of Limit	ELEMEN ded Liability Company	TTS LLC
The enclosed Articles of Amendment	and fee(s) are subn	nitted for filing.	
Please return all correspondence conc	eming this matter t	o the following:	
Ω.	BILL	HARVE Name of Person TEDED A	GENT TNC
70	<u>. U U U U U U U U U U </u>	Firm/Company	
<u>/4(</u>	21 41 <u>H</u>	ST N 3 GC Address	
<u>ST</u>	PETER.	SDERG FL City/State and Zip Code Den + (a) 9 may 1. Com De be used for future annual report noti	33702
Fina	E-mail address: (10	be used for future annual report noti	fication)
For further information concerning the	s matter, please ca	II:	
TERRING Da	MS	at (<u>712</u>) <u>973-</u> Area Code Daytim	\$997 e Telephone Number
Enclosed is a check for the following	amount:		
	Filing Fee & ficate 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 Corporation P.O. Box 6327	s	Street Address: Registration Sec Division of Cor The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	A CA S L AGE S PH 12: 36 Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 17001336.	were filed on JUNE 06; 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	nility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2212 S CHICKASAWTRL # 1146 ORLando FL, 32825
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2212 S CHICKASAW TRL # 1146 ORLando FL, 32825
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent: REG	STERED AGENTIN
New Registered Office Address: 7901 6	HTH ST N 300 Enter Florida street address ETERS BERBEIGHT 33700

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

Zip Code

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
MGR	LOPEZ, MANUE	1619 NE 5TH	🗀 Add
		STREET FORT	tDr.Remove
		LAUDERDALEFL	□Change
		33301	🗆 Add
			□Remove
			□Change
AMBR	YOUNG ADRIANNA	30W03 OAKWOOD	_ taxaa
		CT WARRENWILLE	□Remove
		IL 605.55	□Change
			□Remove
		\$881 CIEAR	MCCK DChange
AMBR	IYLER MITCHEL	DR. MILTON FL	_ EAdd
		32583	□Remove
	1171		□Change
MGR	CHRIS SMIH	2212 S CHICKASAI	
		TR.L #1146 ORLANDO	Remove
		FL 32825	□Change

. II ali	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an e Note	tive date, if other than the date of filing:
he reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	1/2-3-2/ Chila 1
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00