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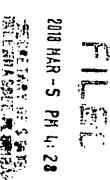
(Req	uestor's Name)	
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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



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HARRIS

COVER LETTER

Div	ision of Corp	orations		
SHRIFAT,	Tellers LLC			
SUBJECT		Name of Lim	ited Liability Company	
The enclosed	d Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		Reid McCullough		
			Name of Person	<u></u>
		McCullough Legal Service	es, LLC	
		 	Firm/Company	
		1630 Morrill Street		
			Address	
		Sarasota, Florida 34236		
			City/State and Zip Code	
		reid@mls941.com	to be used for future annual report notifi	notice)
For further i	nformation co	ncerning this matter, please ca	·	Lation)
Reid McCu			941 525-6385 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	e following amount:		
□ \$25.00 H	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:

TO:

Registration Section

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



February 21, 2018

REID MCCULLOUGH MCCULLOUGH LEGAL SERVICES 1630 MORRILL STREET SARASOTA, FL 34236

SUBJECT: TELLERS LLC Ref. Number: L17000195682

We have received your document for TELLERS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 218A00003576



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tellers LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited)	iny as it now appears on our rec Liability Company)	ords.)
The Articles of Organization for this Limited I	Liability Company	were filed on 9/20/2017	and assigned
Florida document number L17000195682			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "I	.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		4403 24th Avenue East	
Principal office address MUST BE A STRE	ET ADDRESS)	Palmetto, Florida 34221	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		4403 24th Avenue East	DIB HAR
		Palmetto, Florida 34221	23 -5
		·	
n re i i i i i i i i i i i i i i i i i i		C	
B. If amending the registered agent and registered agent and/or the new registered of			rds, enter the figme of the nev
			\
Name of New Registered Agent:	Reid McCullou	gh	
New Registered Office Address:	1630 Morrill St	reet	
	-	Enter Florida street add	Iress
	Sarasota	,	Florida 34236
		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.

/s/ Reid McCullough
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>	Address	Type of Action
MGR	Reid McCullough	4403 24th Avenue East	Add
		Palmetto, Florida, 34221	■ Remove
			Change
MGR	Lauri Contarino	4403 24th Avenue East	Add
		Palmetto, Florida, 34221	□ Remove
			Change
MGR Erica McCreadie	Erica McCreadie	4403 24th Avenue East	■ Add
		Palmetto, Florida, 34221	☐ Remove
			☐ Change
		Add	
			Remove
			Change
		-	Add Remove
			Remove Change
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fective date, if other than the data an effective date is listed, the date must be ote: If the date inserted in this bloc ocument's effective date on the Deporture of the pective date of the Deporture of the pective date of the Deporture of the	e specific and car does not meet artment of State	the applicabe's records.	le statutory filir	nore than 90 days a og requirements,	this date w	ill not be	listed
The 90th day after the recor	is filed.						
February 26		2018					
			•				2018 KAR
/s/ Lauri Cantarino							— XX
	gnature of a men	iber or authoria	zed representative	e of a member		7 (A)	20 !

Page 3 of 3

Filing Fee: \$25.00