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To:

Division of Corporations

Fax Number : (850)617-6383

To: 18506176383

From:

Account Name : FAEHNER PLLC Account Number : I20170000081 Phone : (727)306-0202 : (727)474-9949 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE BELLINO COMPANY, LLC

Certificate of Status	0
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OFP 13 2022



Fax: 7274749949

COVER LETTER

TO:	Registration Sec Division of Corp				
CUDE	The Bellino	Company, LLC			
SORT	ECT:	Name of Limi	ted Liability Company		
The er	nclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.		
Please	return all correspon	ndence concerning this matter t	to the following:		
		Michael J. Faehner			
			Name of Person	<u></u>	
		Faehner PLLC			
			Firm/Company		
		301 Woodlands Pkwy. Suit	e 10		
		1.1	Address		
		Oldsmar, FL 34677			
			City/State and Zip Code		
		filings@fachner.com			
		E-mail address: (to be used for future annual report notif	ication)	
For fu	rther information co	oncerning this matter, please ca	all:		
Micha	acl J. Fuehner		727 306-0201 at ()	: Telephone Number	
	Name of	f Person	Arca Code Daytime	; Telephone Number	
Enclo	sed is a check for th	ne following amount:			
≘ s:	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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

From: Faehner PLLC

To: 18506176383

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Bellino Company, LLC		
(Name of the Limited Liability Ca (A Florida Lim	ompany as it now appears on our records,) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp. Florida document number L17000196467	pany were filed on September 21, 2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Human Resources by TBC, LLC		
The new name must be distinguishable and contain the words "Limited I	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 ADDRESS	S)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off	fice address on our records, enter the	name of the new registere
agent and/or the new registered office address here:		2 S
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		Na Segarate
New Registered Office Address.	Enter Florida street address	95 %
	Plant	## N
	, Florid	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.

9/13/2022 10:22.25 EDT

To: 18506176383

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From: Faehner PLLC

Fax: 7274749949

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
			□Add
			□Remove
			☐ Change
			□Remove
			Change
			□Remove
			□Change
			□Add
			□Remove
			□Add
			Remove
			Change
			□Add
			□Remove
			□Change

Note	ctive date, if other than the date of filing: (optional) (ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (1) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
	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.
Date	d September 13 2022

Typed or printed name of signee