217000232168

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
TO MAR - 5 PM 7: 27

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: KY	I THE TRAXX	LLC	·
	Name of Limi	LLC ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are subn	nitted for filing.	
Please return all corresp	ondence concerning this matter t	o the following:	
	TRUMY- ANN	MARTELL Name of Person	
	BY THE TRAX	χ <u>Li_C</u> Finn/Company	
	2451 NH 4151	Avenue APT. 108 Address	
	LAUNENHILL,	FL 33313 City/State and Zip Code	
	Hudy 99346 E-mgil address: (to	Syahoo. Com boused for future annual report not	ification)
For further information	concerning this matter, please cal	·	·
TRUPY - ACVIN Name	MARTELL of Person	at (<u>954</u>) <u>995</u> Area Code Daytin	- 9672 ne Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	555.00 Filing Fee & Cartified Copy (adultional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclused)

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

BY THE TRI	AXX LLC
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)
The Articles of Organization for this Limited Liability	y Company were filed on and assigned
Florida document number <u>L17000232168</u>	<u> </u>
This amendment is submitted to amend the following	:
A. If amending name, enter the new name of the l	imited liability company here:
The new name must be distinguishable and contain the words "l	Limited Liability Company," the designation "LLC" or the abbreviation L.C.
Enter new principal offices address, if applicable:	TAR AFFINANCE TARRETTARE
(Principal office address MUST BE A STREET AD	DRESS)
Enter new mailing address, if applicable:	TATE A
(Mailing address MAY BE A POST OFFICE BOX)	
registered agent and/or the new registered office a	gistered office address on our records, enter the name of the new ddress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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.

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>	Name	Address 4202 Investary Boulevard	Type of Action
Aρ	WINDY DEFOE	Laudehill, Fly 33319	Add
			Remove
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ective date, if other than the	late of filing:	(optional) Tiling or more than 90 days after filing.) Pursuant to 605.02
e: If the date inserted in this bl	ck does not meet the applicable statut	tory filing requirements, this date will not be listed
ument's effective date on the D	partment of State's records.	
record specifies a delayor	officially data but not an offic	ective time, at 12:01 a.m. on the earlier
he 90th day after the rec		ective time, at 12.01 a.m. on the earlier
ed <u>Febluary</u> 23	<u> </u>	
. (-	
	, 2018. T. Maltell Signature of a member or authorized repre	
	rightantic of a member of authorized repre	escinative of a member

Page 3 of 3

Filing Fee: \$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PA THE TAXX L (Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on	our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000232168</u>		1 0 9 / 20 17 and ass	igned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:	•	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the design	nation "LLC" or the abbreviation "L.	L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			8 LL X
			AHA AR
			SSE
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			S TATE LORID
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		ir records, enter the name	of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida s	street address	
		, Florida	·
	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.

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 = M $AMBR = A$	Tanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address 4202 Inveitary Boulevard	Type of Action
Λρ	WINDY DEFOE	Lauderhill, Fl, 33319	
			Remove
			Change
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Effective date, if other than the date of filing: (optional) f an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuar Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	at to 605,0207 (be listed as th	(3)(b) the
ne record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the The 90th day after the record is filed.	earlier of:	i J
Dated Febluary 23 , 2018 T. Martell Signature of a member or authorized representative of a member		
T. Ma(tell Signature of a member or authorized representative of a member		

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Filing Fee: \$25.00