L17000 252 389

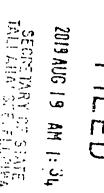
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration Section of Corp.			
SUBJECT:	Trunke	rs LLC	
	Name of Lim	ited Liability Company	-
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	<u>Car</u>	Idace Brown	<u> </u>
		Un Kers Firm/Company	
	28327	Valley Forge S	S+
	Sarasota	FL 3423	3 (
	hellotru E-mail address: (1	City/State and Zip Code Ch Kers @ 201.00 To be used for future annual report notifit	cation)
For further information cor	ncerning this matter, please ca		
Candace	Brown	at (941) 928- Area Code Daytime	3121
Name of I	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
\$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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Trunkers L	-LC			
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)				
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000252389</u>	were filed on 12/11/7 and assigned			
This amendment is submitted to amend the following:				
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 "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	Candoce Brown 2832 Valley Forge S			
(Principal office address MUST BE A STREET ADDRESS)	Sarasota FL 3423/			
	same principal-NO			
Enter new mailing address, if applicable:	SAA			
(Mailing address MAY BE A POST OFFICE BOX)	No change			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	<u>e</u> :			
Name of New Registered Agent.				
New Registered Office Address:	Enter Florida street address			
	City Zip Goode			
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is			
If Chai	nging 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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
Partner	William Wisell	2827 Vulley Forge St	
		Sarasota FL 34231	Remove
			Change
Manager	Bradford Singiser	3804 Sun Eagle Lane	OLAGd
		Bradenton, FL 34210	🗆 Remove
			Change
*			
			Remove
			Change
			□ Add
			□ Remove
			Change
			_□ Add
			C Remove
			Change
			□ Add
			_□ Remove
			□ Change

). II aine	ending any other information, enter change(s) here: (Allach daditional sheets, if necessary.)
_	
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<u>Note:</u>	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	8.9 2019.
	Comer Bran
	Signature of a member or authorized representative of a member
	Candace Brown

Page 3 of 3

Filing Fee: \$25.00