117000257051

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COVER LETTER

Registration Section

TO:

Division of Cor	porations ·		
	TCH INVESTMENTS LLC		
SUBJECT:	Name of Lim	ited Liability Company 14 11 11	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	RICHARD TREBILCOC	К	
		Name of Person	
	TOP KNOTCH INVEST	MENTS LLC	
		Firm/Company	
	4065 CARLTON INLET	RD APT B	
		Address	
	BRADENTON, FL 3420	8	
For further information c	SPRINGTAX@HOTMAIL E-mail address: (oncerning this matter, please c	to be used for future annual report not	ification)
RICHARD TREBILCO	ск	727 3797023	
Name o	f Person	at ()Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C	Section	Street Address: Registration Se Division of Co	
P.O. Box 632	.7	The Centre of T	Fallahassee
Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Control	ny ay it now appears on our reco	arets 3
(Name of the Limited Liability Compar (A Florida Limited L	lability Company)	 ,
The Articles of Organization for this Limited Liability Company Florida document number L17000257051	were filed on 12/18/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the new nam	ity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		20 NUG -3
(Mailing address MAY BE A POST OFFICE BOX)	•	SSES. FL
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>ent</u>	er the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	ress
	City, 1	Florida
New Registered Agent's Signature, if changing Registered Agent:	·	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p	ve to act in this capacity. I performance of my duties,	further agree to comply with the 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 alrending 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	DANIEL NAY	7493 GATHERING DRIVE	□Add
		REUNION, FL 34747	≣ Remove
			□Change
MGR DR	DRAGA STOYANOVICH	25836 WARRINGTON ST	≣Add
		DEARSORN HTS, MI 48127	🗀 Remove
			□Change
			FREMAN 3
			ASSEE, FL
			Add
			□ Remove
			☐ Change
			🗀 Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	
			□Add
			□Remove
			□Change

₹ •	mation, enter change(s) here: (Attach additional sheets,	-
		
		
		W. C.

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Note: If the date inserted in thi	the date of filing: must be specific and cannot be prior to date of filing or more than 90 d s block does not meet the applicable statutory filing requireme e Department of State's records.	_ (optional) lays after filing.) Pursuant to 605.0207 (3) ents, this date will not be listed as th e
if the record specifies a delayed efferecord is filled.	ective date, but not an effective time, at (2:01 a.m. on the earlie	er of: (b) The 90th day after the
JULY 01 Dated	2020	
-/-/1	Signature of a member or authorized representative of a member	г
RICHARD BURR	TREBILCOCK	
	Typed or printed name of signee	

Filing Fee: \$25.00