11800 103853

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
anana
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100316460691

08/02/18--01027--008 **25.00

SECRETARY OF SIFIE DIVISION OF CORPORATIONS

N COOPER AUG 0 8 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tax on Track LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:
Lakeisha Baptiste
Tax on Track LLC Firm/Company
2101 SW 101 St Ave #204
HICAMAY, FL 32025 City/State and Zip Code +AXESON-TYACK @ AMAIL. COM
For further information concerning this matter, please call: Area Code Daytime Telephone Number Area Code Daytime Telephone Number Daytime Teleph
Name of Person Enclosed is a check for the following amount: S25.00 Filing Fee Sactificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Registration of Corporations Division of Corporations P.O. Box 6327 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tax on track LLC	as it now appears on our records.)
(Name of the Limited Liability Company (A Florida Limited Lia	bility Company)
The Articles of Organization for this Limited Liability Company w Florida document number 11200103853	vere filed on <u>April 252018</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
A. If amending name, enter the new name of	
The new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2101 SW 101 St Ave #204 Micanac, FL 33025
Enter new mailing address if applicable. (Mailing address MAY BE A POST OFFICE BOX) R. If amending the registered agent and/or registered of	##129 Hollywood Blvd #81636 ##10114WOOD, FL 33W81 ##icc address on our records, enter the name of the new TE:
B. If amending the registered agent and registered agent and/or the new registered office address ber	<u>c</u> :
	3 2 3 3 3 3 3 3 3 3 3 3
Name of New Registered Agent:	AU
New Registered Office Address:	Enter Florida street address 2 SAFE
_	Florida Zip Ade S
	City STATE
New Registered Agent's Signature, if changing Registered Agen	ti Similar with the
I hereby accept the appointment as registered agent and agent provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officompany has been notified in writing of this change.	te performance of my duties, and I am familiar with and
us	hanging Registered Agent, Signature of New Registered Agent
If C	nanging regions and a second

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 Type of Action <u>Address</u> Name Title Lakeisha Baptisk 2101 SW 101 St Ave #201 portu Miramar, FL 33025 ☐ Change □ Add ☐ Remove ☐ Change _□ Add ☐ Remove □ Change □ Add □ Remove ☐ Change \square \land dd ☐ Change _□ Add ☐ Remove ☐ Change

			_
			_
			_
			_
			_
-			_
			_
			_
			_
			_
		18 AUG	 SIAIG
		an line	2
		-2	_0 C
			 ⊝
			CORPORATION
		PH 12: 40	107
			
t *** *			
Costive date if Of	ther than the date of filing: sted, the date must be specific and cannot be prior to date of filing or more than sted, the date must be specific and cannot be prior to date of filing or more than sted.	(optional)	605 t
	sted, the date must be specific and cannot be prior to date of filing or more than seated in this block does not more the applicable statutory filing require a date on the Department of State's records.	ements, this date will not be	liste
e record specific The 90th day a	es a delayed effective date, but not an effective time, a after the record is filed.	t 12:01 a.m. on the ea	arlie
Pated	31 2018 . Signature of a member or authorized representative of a me	mbei	_
-	Lakorra Graptiste Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00