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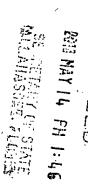
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HAY 14 20th LARRIS



COVER LETTER

TO:	Registrat Division							
SUBJE	:ст:	TPC	COVER	Name of Limi	ted Liability Company	AMMEN	DMENT	
					mitted for filing.			
					Name of Person	Saurana	<u>. </u>	
			7PC	COVER	L SOWTIONS Firm/Company	LLC		
		-	4040	I E M	Address		· · · · · · · · · · · · · · · · · · ·	
			020	g oeus	City/State and Zip Co	da .		
			JOAS	10.400	MALL. COM to be used for future annu	,	ation)	
For furt	her inform	ation con	cerning this ma	atter, please ca	ill: .			
Ju	20 PAG	Vaine of P	erson	UTOUG	at (904) Area Code	377 Daytime	1297 Telephone Number	-
Enclose	ed is a chec	k for the	following amo	unt:				
5 \$25	5.00 Filing l	Fee	□ \$30.00 Fili Certificat	ng Fee & e of Status	☐ \$55,00 Filing Fe Certified Copy (additional copy is		□ \$60.00 Filing Fee Certificate of St Certified Copy (additional copy is of	atus &
								4

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

JTC COVER JOWNON					•	
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appointed Liability Company	oears on our re	cords.)			
The Articles of Organization for this Limited Liability Comp. Florida document number 5/8 A 0000 0045 L	oany were filed on	1 YAM		and ass	signed	J
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited	liability company	<u>/ here</u> :				
The new name must be distinguishable and contain the words "Limited"	7 1 1 1 2 A 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1	31.09	\$ 10	192 - 193	
The new name must be distinguishable and contain the words "Limited in the words "Limite	Liability Company," ti	he designation "	'LLC'' or the abb	reviation "L	.L. <u>(</u> "	4==
Enter new principal offices address, if applicable:				(5) (5)	<u></u> <	#n
(Principal office address MUST BE A STREET ADDRES.	<u>s)</u>			64) 244 1141		[7] - [7]
						Ç
Enter new mailing address, if applicable:		·		ធ្វេក	8 2	
(Mailing address MAY BE A POST OFFICE BOX)						
B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent:	ed office address here:	on our rec	ords, <u>enter t</u>	he name	of the	e new
New Registered Office Address:						
•	Enter	Florida street a	ddress			
	O'm.		, Florida			
Now Delta 14 A Clark to the control of the control	City			Zip Code		
New Registered Agent's Signature, if changing Registered Agent and I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of	l agree to act in the plete performance t as provided for t	e of my dutie. in Chapter 6	s, and I am fa 105, F.S. Or, i	imiliar wi If this doc	th and ument	,
company has been notified in writing of this above		<i>y</i> - <i>y</i>			,	

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

, Title Type of Action Address Name 6305 ROLLING TREE DIEGO ALEMAN □ Remove ☐ Add··· □ Remove ப் Change MG □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change ☐ Remove ☐ Change

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lfan ei <u>Note:</u>	ctive date, if other than the date of filing:	.0207 (3)(1 ed as the
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie	er of:
ie re Thi	e 90th day after the record is filed.	
The	e 90th day after the record is filed.	-420
The	e 90th day after the record is filed.	Tank Tank

Page 3 of 3

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