118000 144349

(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





700314878987

66/28 18--01000--604 **c. .UL

18 JUN 25 PM 3: 38

SECRE WAS DESIGNATIONS OF SECRETARIONS

N COOPER JUN 2 5 2018

COVER LETTER

TO:	Registration Se Division of Cor			
CHIDIC	Tina # 10,	LLC		
SUBJE	CI:	Name of Lin	nited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Piease re	eturn all correspo	ndence concerning this matter	to the following:	
		Les C. Shields, Esq.		
			Name of Person	
		Morris & Shields		
Firm/Company				
	685 Royal Palm Beach Blvd, Suite 205			
			Name of Limited Liability Company Indiment and fee(s) are submitted for filing. It concerning this matter to the following: Best C. Shields, Esq. Name of Person Orris & Shields FirmvCompany Bis Royal Palm Beach Blvd, Suite 205 Address Doyal Palm Beach, FL 33411 City/State and Zip Code dinkids60@gmail.com E-mail address: (to be used for future annual report notification) and this matter, please call: Daytime Telephone Number Dowing amount:	
		·		
			to be used for future annual report notifi	cation)
For furth	ner information co	oncerning this matter, please c	·	
Les C.	Shields		· · · · 	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	e following amount:		
\$253	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

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

TINA #10, LLC		
(Name of the Limited Liability (A Florida)	y Company as it now appears on our record Limited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Co	ompany were filed on 6/12/2018	and assigned
Florida document number L 18000133449	<u>.</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC"	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	
		1 8 J
Enter new mailing address, if applicable:		25
(Mailing address MAY BE A POST OFFICE BOX)		1
•		မှ ညိုန်
		——————————————————————————————————————
B. If amending the registered agent and/or registered agent and/or the new registered office addre		, enter the name of the no
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		orida
	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	Type of Action
AMBR	MARIAM FARHA	117 HERON PARKWAY	
		ROYAL PALM BEACH, FL 3341	■ Remove
			☐ Change
MGR	MARIAM FARHA	117 HERON PARKWAY	
		ROYAL PALM BEACH, FL 3341	☐ Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change
			Remove
			Change
			□ Remove
			Change

•		
		
		JIVIS 18
		Na Signatura
_		
		<u> </u>
		38
(If an effect <u>Note:</u> If	e date, if other than the date of filing: [6/12/2018] (optional) ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Puthe date inserted in this block does not meet the applicable statutory filing requirements, this date with the effective date on the Department of State's records.	ursuant to 605.0207 Il not be listed as
If the reco (b) The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on 0th day after the record is filed.	the earlier of
Dated	June 18. 2018.	

Page 3 of 3

Filing Fee: \$25.00