118000155763

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DIVISION OF CORPORATIONS

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COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	ТЕАМ МС	BRIDE ILLUMINATED, LLC		
SUBJECT.		Name of Lim	Address ainesville, FI 32608 City/State and Zip Code @tmi.tips E-mail address: (to be used for future annual report notification) and this matter, please call: at (765	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	i all correspo	ndence concerning this matter	to the following:	
		Nicholas C McBride		
			Name of Person	
		Team McBride Illuminate	ed, LLC	
			Firm/Company	
		7020 SW 78th St.		
			Address	
		Gainesville, Fl 32608		
			City/State and Zip Code	
		nic@tmi.tips	·	
		E-mail address: (to be used for future annual report notif	ication)
For further in	nformation e	oncerning this matter, please ca	all:	
Nicholas C McBride				
	Name o	f Person		Telephone Number
Enclosed is a	a check for th	ne following amount:		
□ \$25.00 F	filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

Registration Section

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

TEAM MOBRIDE ILLUMINATED, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records. Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000155763</u> .	were filed on June 25, 2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		3
		A Constitution
		OF C
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		—————————————————————————————————————
		~ Z
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:		ner me name of the ne
New Registered Office Address:		
Hew Registered Office / Address:	Enter Florida street address	
	, Florid	aZip Code
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr	ce to act in this capacity. I further	r agree to comply with the

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>	<u>Name</u>	Address	Type of Action
AMBR	Nicholas C McBride	7020 SW 78th St.	
		Gainesville, Fl 32608	Remove
			Change
	Stephanie L McBride	7020 SW 78th St.	= Add
		Gainesville, FI 32608	Remove
			Change
			Remove
			Change
			Remove
			Change
		<u> </u>	Remove
			Change
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			□ Change

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lf an effec <u>Note:</u> 1	re date, if other than the date of filing: ctive date is listed, the date must be specific and cannot be prior to date of filing f the date inserted in this block does not meet the applicable statutory to nt's effective date on the Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to 605 filing requirements, this date will not be liste	5.0207 ed as
	ord specifies a delayed effective date, but not an effective 90th day after the record is filed.	ve time, at 12:01 a.m. on the earlie	er of
Dated _	July 30 . 2018 Nich 1 C MB Signature of a member or authorized representation		
	Nich A (MB and		

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Filing Fee: \$25.00