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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:		TAS LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	Registered agent:
	Thomas	S. Sasser Name of Person	Registered agent: Northwest Registered Agent 3030 N. Rocky Pt. Dr. Ste 150 Tampa. FL 33607
	Big + Ti	a's LLC Firm/Company	Tampe. FL 33607
	3911 Lau	vel Brach Ct.	
	•	City/State and Zip Code	
	E-mail address: (1	08 @ yahoo. C	Cation)
For further information co	oncerning this matter, please ca	ill:	
Thomas S Name of	. Sasser	at (<u>863</u>) 701-6 Area Code Daytime	5057 Telephone Number
Enclosed is a check for th	e following amount:		
♥ \$25.00 Filing Fee # 1783	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
,			

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**

SIG + IIAS (Name of the Limited Liability Co.) (A Florida Liability Co.)	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com- Florida document number <u>L 18000173546</u> .	npany were filed on <u>July 18, 2018</u> and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	I liability company here:
The new name must be distinguishable and contain the words "Limited	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 ADDRES	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	22
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	ed office address on our records, enter the name of the news shere:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
lew Registered Agent's Signature, if changing Registered A	gent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and scept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ping filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability mpany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

or removed	Authorized Person(s) authorized to man	age, enter the title, name, and address of each I	person being added			
MGR = M	GR = Manager MBR = Authorized Member					
<u>Title</u>	Name	Address	Type of Action			
MGR	Thomas S. Sasser	3911 Lawel Branch Ct.	Add			
		Lakeland, FL 33810	□ Remove			
			🗆 Change			
MGR	Jennifer T. Sasser	3911 Lawrel Branch Ct.	_ 7 .\.			
			🗆 Remove			
			Change			
			_ Add			
			Remove			
			Change			
			_□ Add			
			_□ Remove			
			_□ Change			
			Add			
			_□ Remove			
			Change			
			Add			
			_□ Remove			
			□ Chanas			

amendii	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	hange the option to Show members of BIG+
-	IAS LLC in Our "Articles of Organization" to
	IES. So the members will show with the
	Articles along with their titles.
	mes to be visible in "Authorized
<u> P</u>	erson(s) Detail" on Sunbig report.
	
	. '
n effective ete: If th	late, if other than the date of filing:
The 90t	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o th day after the record is filed.
ted	12/9/18 December 9. 2018 Alones & Sasser
-	Signature of a member or authorized representative of a member
	Thomas S. SASSER Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00