11800174647

(Re	questor's Name))
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
— (Bu	siness Entity Na	nme)
(Do	ocument Number	*)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	

Office Use Only



200316430242

07/31/18--01008--014 **25.00



O SMARAONS AUS U , 2018

COVER LETTER

Division of Corporations			
SUBJECT: TM	LM LLC	•	
	Name of Lim	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:	
	<u></u>	Ex Mil ono Name of Person	
	Onal	Firm/Company	3es LC
	1313 Boy	enton Beach	Blvd 18#337
	Royanton Alexaona E-mail address:	Seach 33 City/State and Zip Chde Ling Property was to be used for future annual report not	rageneint. Com
For further information c	oncerning this matter, please ca	all:	
Alex Name o	Milano FPerson	at (<u>631)</u> <u>513</u> Area Code Daytim	ne Telephone Number
Enclosed is a check for the	ne following amount:		
25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on 7/19/20/8 and assigned Florida document number 6 8 000 (7 46 4 7).
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, Florida
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 = M: AMBR = Ai	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Caus Milano	11577 Puerto Blvd	
		1577 Puerto Blvd Bapan Beach, FL 73437	2 Remove
		73437	🗖 Change
		· · · · · · · · · · · · · · · · · · ·	Add
			Remove
			Change
			□ Add
			Remaye 3 Change
			20
			Remove
			Change
			□ Remove
			Change
			
			□ Remove

☐ Change

	·
,	
•	
	TO THE CONTRACT OF THE CONTRAC
	SEED P
•	The state of the s
	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
lf an ef <u>Note:</u>	ive date, if other than the date of filing:
ne re The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier on the day after the record is filed.
Dated	July Lyth Jal Milano
	Signature of a member or authorized representative of a member
	Terri M Milano

Page 3 of 3

Filing Fee: \$25.00