## 118000207294

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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

	egistration Se ivision of Cor		•	•
eup men	Telltale Ima	agery, LLC	·	
SUBJECT	F	Name of Lin	nited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retur	m all correspo	ondence concerning this matter	to the following:	
		Stelios J. Malamatos		
			Name of Person	
		Telltale Imagery, LLC		
			Firm/Company	
		1604 Gulf Rd.		
			Address	
		Tarpon Springs, FL 34689		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		telltaleimagery@gmail.com		
For further	information c	encerning this matter, please c	to be used for future annual report r	otification)
Магу В. М	alamatos		727 432-1896	
	Name o	f Person	at () Area Code Day	time Telephone Number
Enclosed is	a check for the	he following amount:		
\$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addres		Street Address:	
		Section Corporations	Registration S Division of C	
P.	O. Box 632	27	The Centre o	f Tallahassee
Ta	allahassee, I	FL 32314	2415 N. Mon	roe Street, Suite 810

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Telltale Imagery, LLC		
(Name of the Lim	ited Liability Company as it now appears on our record (A Florida Limited Liability Company)	ds.)
he Articles of Organization for this Limited lorida document number 118000207294	Liability Company were filed on August 29, 2018	and assigned
his amendment is submitted to amend the fol	llowing:	
. If amending name, enter the new name	of the limited liability company here:	
ne new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
nter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
		2
		23(
nter new mailing address, if applicable:	<u> </u>	21123 OCT
Aailing address MAY BE A POST OFFICE		
		<u></u>
		<u>=</u>
· · ·	registered office address on our records, enter	
gent and/or the new registered office addre	ess here:	, · · <b>co</b>
Name of New Registered Agent:	Mary B. Malamatos	
New Registered Office Address:		
	Enter Florida street addre.	SS
	, FI	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.

Mary B. Malanuks

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

ı

<u>Title</u>	Name	Address	Type of Action
VP	Kelly L. Tyler	1604 Gulf Rd.	
		Tarpon Springs, FL 34689	□Remove
			(BChange
RA/S/T	Mary B. Malamatos	1604 Gulf Rd.	C3\/dd
		Turpon Springs FL 34689	□Remove
			□Change
			🗆 Add
			□Remove
			Change
			□Add
			🗆 Remove
			□Change
			□Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			□Add
		•	□Remove
			Change

A media department will re	emain in place for the photography and videography needs of the corporation,
and for outsourcing to clier	nts.
-	
ffective date, if other than th	he date of filing: (optional)
an effective date is listed, the date moter of the date inserted in this	nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 block does not meet the applicable statutory filing requirements, this date will not be listed a Department of State's records.
record specifies a delayed effect lis filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated October 5	2023

Filing Fee: \$25.00

Typed or printed name of signce