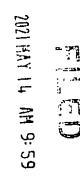
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## **COVER LETTER**

Division of Cor			•••
SUBJECT: Tribe-Te	ch LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Name of Person	
	Tribe-Tech LLC	Firm/Company	
		Name of Person  Firm/Company  Address  City/State and Zip Code  gmail.com dress: (to be used for future annual report notification) ease call:  at (631 / Area Code)  Area Code  Daytime Telephone Number  & S55.00 Filing Fee & S60.00 Filing Fee and S60.00 Filing Fee	
		Address	
	jenniferrlewis614@gmail.	•	
	E-mail address: (	to be used for future annual report notifi	ication)
For further information of	concerning this matter, please c	all:	
Jennifer Lewis		at (631 ) 455-2879	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
<b></b>	INC ADDRESS.	стреет//онри	ED ADDREC.

### 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**

	Ţ	U	
ARTI	CLES OF C	RGANIZATION	2 A
	O	F	Mrs. P.
			A STATE OF THE STA
Tribe-Tech LLC			records.)
(Name of the Limite	d Liability Compa	ny as it now appears on our liability Company)	records.)
`	A I Wilda Ellinico i	addin'ty exhapany (	50
The Articles of Organization for this Limited Lia	ability Company	were filed on 10/1/18	and assigned
Florida document number L18000232262			`
Tiorida decument transcer	<del></del> ,		
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
· · · · · · · · · · · · · · · · · · ·			
J.R Lewis LLC  The new name must be distinguishable and contain the wo	rete "Limited Liabil	ity Company " the decignation	n "LLC" or the abbreviation "LLC"
The new harde must be distinguishable and contain the wi	nus Emiteu Elain		is the of the above value.
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		7901 4th St N	
		STE 300	
		St. Petersburg FL	33702
Enter new mailing address, if applicable:		7901 4th St N	
(Mailing address MAY BE A POST OFFICE BOX)		STE 300	
		St. Petersburg FL	33702
		<u> </u>	
B. If amending the registered agent and/o	or registered of	ffice address on our r	ecords, enter the name of the new
registered agent and/or the new registered off			terras, the name of the new
Name of New Registered Agent:	Registered	d Agents Inc.	
-	7001 Ath 9	St N STE 300	
New Registered Office Address:	7301 4013	Enter Florida stree	t address
	St Datam		
	St. Peters	City	Florida 33702
		Cirj	Egr Cont.

#### 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
			Remove
			Change
			□ Add
			☐ Remove
			Change
		·	□ Add
			☐ Remove
			☐ Change
		F-14 L	Add
			☐ Remove
			□ Change
	***************************************		□ Add
			□ Remove
			□ Change
			Add
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				/ A' IV	
effective date is listed, the te: If the date inserted	han the date of filing:e date must be specific and can in this block does not meet on the Department of State	not be prior to date of the applicable stat	filing or more than 90 da utory filing requireme	_(optional) ays after filing.) Pursuant to nts, this date will not be	605.02 listed :
	delayed effective date the record is filed.	, but not an ef	fective time, at 1	2:01 a.m. on the ea	arlier
<sub>ed</sub> May 11	2	2021			
		P.			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00