# L18000 252743

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# **COVER LETTER**

	ation Sec i of Corp	rtion porations			
enth trzyr.	TCI	. INTERNATIONAL, LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed Art	icles of z	Amendment and fee(s) are sub	omitted for filing.		
Please return all o	correspoi	ndence concerning this matter	to the following:		
		CARLOS BETHENCOUR	₹1.		
			Name of Person		
		TCL INTERNATIONAL,	LLC		
			Firm/Company		
	2749 N POINCIANA BLVD UNIT 20				
			Address		
		Kissimmee, FL 34746			2 -
		<del></del>	City/State and Zip Code		22 OCT 17
		isabelmultiservices@gmail.	.com to be used for future annual report not	itication)	
For further inform	nation co	oncerning this matter, please co			PH
CARLOS BETHENCOURT.			786 556-5914		00T 17 PH 9: 26
Name of Person		Person		ne Telephone Number	
Enclosed is a che	ek for th	e following amount:			
■ \$25.00 Filing	g Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fe Certificate of St Certified Copy (additional copy is o	atus &
	Address		<u>Street Address:</u> Registration Sc	ection	
Registration Section Division of Corporations			Division of Co		
P.O. Box 6327			The Centre of Tallahassee		
Tallahassee, FL 32314			2415 N. Monre	e Street, Suite 810 🥏	

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TCL INTERNATIONAL, LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Compar Florida document number <u>L18000252743</u> .	ny were filed on 10-26-2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		22 :
		8 5
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	-1	<u> </u>
		<u> </u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter the</u>	name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florid	
	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	WILMER A. JIMENEZ ROJAS	2749 N PONCIANA BLVD	
MGR - AMB	R. PARTNER. OWNER OF 25%	UNIT 20	■Remove
		KISSIMMEE, FL 34746	□Change
AMBR	MARIANA V. BETHENCOURT	2749 N PONCIANA BLVD	<b>≣</b> Add
MGR - AMF	BR. PARTNER, OWNER OF 25%	UNIT 20	Remove
		KISSIMMEE, FL 34746	□ Change
	·		
			22 Cartil Remove
			PH Change 9: 20 Add-
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ffective date, if other than effective date is listed, the	an the date of filing: late must be specific and cannot be prior to da	(optional) nte of filing or more than 90 days after filing.) Pursuan	n 10 605 D207
ote: If the date inserted in	this block does not meet the applicable	statutory filing requirements, this date will not	
ocument's effective date o	n the Department of State's records.		
record specifies a delayed. Lis filed.	effective date, but not an effective time,	at 12:01 a.m. on the earlier of: (b) The 90th d	ay after the
is med.			
10/15	2027		
aled	2027		
	Mar It		

Typed or printed name of signee



Department of State / Degrees of Conventions / Starth Records / Seagulty, Epith Jones /

## **Detail by Entity Name**

Florida Limited Liability Company TCL INTERNATIONAL, LLC

#### Filing Information

Document Number

L18000252743

FEI/EIN Number

83-2375690

Date Filed

10/26/2018

Effective Date

10/26/2018

State

Status

ACTIVE

#### Principal Address

2749 N POINCIANA BLV

**UNIT 20** 

Kissimmee, FL 34746

Changed: 03/24/2020

#### Mailing Address

2749 N POINCIANA BLVD

UNI1 20

Kissimmee, FL 34746

Changed, 03/24/2020

#### Registered Agent Name & Address

BETHENCOURT, CARLOS 2749 N POINCIANA BLVD

UNIT 20

ORLANDO, FL 34746

Name Changed: 03/24/2020

Address Changed: 03/24/2020 Authorized Person(s) Detail

Name & Address

Title MGR, OWNER 75%

BETHENCOURT, CARLOS L 2749 N POINCIANA BLVD

UNIT 20

Kissimmier, FL 34746

Title MGR, OWNER 25%

JIMENEZ, WILMER A 2749 N POINCIANA BLV

UNIT 20

Kissimmee, FL 34746

## **Annual Reports**

Report Year	Filed Date
2020	03/24/2020
2021	04/14/2021
2022	04/07/2022

#### **Document Images**

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