L18000276902

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COVER LETTER

TO:

Registration Section Division of Corporations

Taliahassee, FL 32314

TFG ACCOUNTING AND TAX MARGATE LLC SUBJECT: _ Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: LOU FUOCO Name of Person THE FUOCO GROUP HOLDINGS, LLC Firm/Company 772 US HIGHWAY ONE, SUITE 200 Address NORTH PALM BEACH, FL 33408 City/State and Zip Code LFUOCO@FUOCO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: LOU FUOCO Name of Person Daytime Telephone Number Enclosed is a check for the following amount: **■ \$25.00** Filing Fee ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TFG ACCOUNTING AND TAX MARGATE,	•	
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor	mpany were filed on 11/30/2018	and assigned
Florida document number L18000276902	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		22
(Principal office address MUST BE A STREET ADDRE	<u> </u>	<u> </u>
		R 0.75 1
		~ 0∰7
Enter new mailing address, if applicable:		5 27
(Mailing address MAY BE A POST OFFICE BOX)		
		ω -
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter th</u>	ne name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	P Pl +1	
	Enter Florida street address	
	, Flor	Zip Code
	City	гір Соае

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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGMR	LOU FUOCO	772 US HIGHWAY ONE, STE 200	□ Add
		NORTH PALM BEACH, FL 33408	≅Remove
			□Change
MGMR	THE FUOCO GROUP HOLDING:	772 US HIGHWAY ONE, STE 200	≣Add
		NORTH PALM BEACH, FL 33408	□Remove
			Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
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			□Change

		
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	t be specific and cannot be prior to date of filing or more than 90 da ock does not meet the applicable statutory filing requiremen	
ne record specifies a delayed effection ord is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier	r of: (b) The 90th day after the
Dated APRIL 1	Con Luccu	
	No frances	
	Signature of a member or authorized representative of a member	
LON PUODO DES	•	
LOU FUOCO, CEO		

Filing Fee: \$25.00