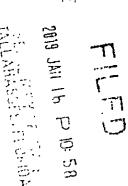
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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COVER LETTER

	gistration se vision of Cor			•
SUBJECT:	том ват	TLE LLC	•	
SUBJECT		Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
		ndence concerning this matter	<u>-</u>	
	(
			Name of Person	
		TOM BATTLE LLC		
			Firm/Company	
		10608 FORE DRIVE		温を
			Address	
		TAMPA, FL 33612		The Part of the Pa
			City/State and Zip Code	77 7
		REMOR81@HOTMAIL.C		<u>ن</u> ب
			to be used for future annual report not	fication)
For further	information c	oncerning this matter, please ca	all:	
KENNETH TOM BATTLE		813 505-8943 at ()		
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is	a check for th	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)
		ING ADDRESS:	STREET/COUR	
Registration Section Division of Corporations		Registration Section Division of Corpo		
	P.O. Bo	ox 6327 ussec, FL 32314	Clifton Building 2661 Executive Co	

Tallahassee, Fl. 32301

ARTICLES OF AMENDMENT

ARTICLES OF ORGANIZATION OF

TOM BATTLE LLC			
(Name of the Limi	ted Liability Company as it now appears o (A Florida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited I	iability Company were filed on 01/01	/2019 and assigned	
Florida document number L19000004613	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company here	;	
The new name must be distinguishable and contain the	words "I imited I ishility Commony" the deci	enation "I I (" or the abbreviation "I I ("	
the new name must be distinguishable and contain the	words Limited Liability Company, the design	giadon LLC of the abtreviation LLC.	
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
		F. 12 -11	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	POV	37 0 1	
Manual duaress MAT BE A FOST OFFICE	BUAJ		
			
O If amounting the projetowed arount and	Non maintained affine addition on a		
B. If amending the registered agent and registered agent and/or the new registered or		ur records, enter-the name of the	
	•		
Name of New Registered Agent:	KENNETH TOM BATTLE		
New Registered Office Address:	10608 FORE DRIVE		
	Enter Florida	street address	
	TAMPA	. Florida 33612	
	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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	KENNETH TOM BATTLE		
			□ Remove
		10608 FORE DRIVE, TAMPA, FL 3362	☐ Change
			Remove
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			Add 7
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	01/01/2019	
E. Effect	tive date, if other than the date of filing: (optional)	
	ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as	
	ment's effective date on the Department of State's records.	uic
16 44		
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.	:
(6)	e John day dicer the record is filed.	
Dated	Kenneth (m. Sattate Signature of a member or authorized representative of a member	
	1	
	Kenneth in Sattle	
	Signature of a member or authorized representative of a member	
	KENNETH TOM BATTLE	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00