

L19000009649

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

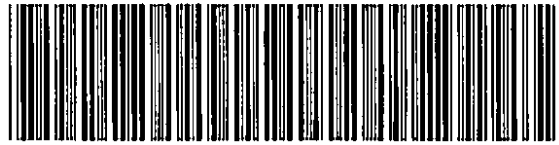
(Business Entity Name)

(Document Number)

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D SCOTT

JUN - 8 2019

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TNU Partners LLC

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:

Joseph D Coyle

Name of Person

TNU Partners LLC

Firm/Company

1721 Nature CT

Address

Palm Beach Gardens, FL 33410-1296

City/State and Zip Code

joe@coyle.ws

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph D Coyle

973 876-4478  
at ( )  
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the 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)

**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**

TNU Partners LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on February 8, 2019 and assigned  
Florida document number L19000009649

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability 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)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

*City* Florida *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**

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>	<u>Type of Action</u>
<u>Ambr</u>	Scott H Schlesinger	1721 Nature CT	<input type="checkbox"/> Add
		Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>Ambr</u>	Lanny S Cohen	1721 Nature CT	<input type="checkbox"/> Add
		Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>Ambr</u>	Dharmesh Chovatia	51 Sherborne Street	<input checked="" type="checkbox"/> Add
		Somerset, NJ 08873	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>Ambr</u>	Neil Palmiotto	236 Jefferson Avenue	<input checked="" type="checkbox"/> Add
		Hasbrouck Heights, NJ 07604	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>Ambr</u>	Thomas Vacca	50 Continental Road	<input checked="" type="checkbox"/> Add
		West Milford, NJ 07480	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>Thomas Vacca</u>			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

