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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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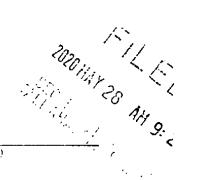
Registration Section Division of Corporations

TO:

ANVIL RE	AL ESTATE LLC						
SUBJECT:	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:					
	KYLE SCOTT						
		Name of Person					
	ANVII, REAL ESTATE I	A.C					
		FirmCompany	·				
	6649 MARINA POINTE VILLAGE CT., APT 203						
	Address						
	TAMPA, FL 33635						
		Cirv/State and Zip Code					
	KYLE.D.SCOTT@OUTLC						
	E-mail address: (to be used for future annual report no	tification)				
For further information c	concerning this matter, please o	all:					
KYLE SCOTT		586 709-4208					
Name of Person			me Telephone Number				
Enclosed is a check for t	he 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 Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Mopre	orporations				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**



ANVIL REAL ESTATE LLC

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

Florida document number L19000028841	were filed on 1-28-2019 and assigned		
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
TM SHOP LLC			
The new name must be distinguishable and contain the words "Lim" ed Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	6649 MARINA POINTE VILLAGE CT.		
(Principal office address MUST BE A STREET ADDRESS)	APT 203		
Trincipal office maires brown be high Nobel Notices	TAMPA, FL 33635		
Enter new mailing address, if applicable:	6649 MARINA POINTE VILLAGE CT		
(Mailing address MAY BE A POST OFFICE BOX)	APT 203		
	TAMPA, FL 33635		
B. If amending the registered agent and/or registered office :	uddress on our records, enter the name of the new registers		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the name of the new registere</u>		
agent and/or the new registered office address here:			
agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new registere Enter Florida street address		
agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street address		
Name of New Registered Agent: New Registered Address:	Enter Florida street address Florida Zip Code		
agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida street address Florida Zip Code		

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 addedor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			□Change
			⊟Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
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····			□Add
			□Remove
			□Change

Page 2 of 3

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Effective date, if other than the da (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depart	c does not meet the applic	cable statutory filing re	(optional) than 90 days after filing.) Pure equirements, this date will	suant to 605,0207 (3 not be listed as th
the record specifies a delayed e) The 90th day after the record		ot an effective tim	e, at 12:01 a.m. on t	the earlier of:
	2020			
Dated MAY 25TH		·		
Dated MAY 25TH	11			
Dated	gnature of a member or anth	orized representative of	ı member	

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Filing Fee: \$25.00