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	egistration Sec ivision of Corp				
eu e ie et		NVESTMENT LLC			
SUBJECT	÷	Name of Limit			
		Amendment and fee(s) are subnutered			
		OLGA MEDINA			
			Name of Person		
			Firm/Company		
	1220 AZALEA CT				
		MELBOURNE FL 32935	Address		
		 	City/State and Zip Code		
		E-mail address: (t	o be used for future annual report	notification)	:
For furthe	r information co	oncerning this matter, please ca	ill:		<u></u> <u>₹</u>
OLGA M	IEDINA		954 200-410 at ()		الله الله الله الله الله الله الله الله
	Name of	f Person	Area Code Da	ytime Telephone Number	
Enclosed	is a check for th	ne following amount:			7022TO
\$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &

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

TINALON INVESTMENT 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 02/01/2019 Florida document number L19000033220 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 "LLC." 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: OLGA MEDINA Name of New Registered Agent: 1220 ATALEA CT New Registered Office Address: Enter Florida street address

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>	Address	Type of Action
AMBR	OLGA MEDINA MOREL	1220 AZALEA CT	
<u></u>		MELBOURNE FL 32935	□ Remove
			Change
AMBR	OLGA MEDINA	1220 AZALEA CT	= Add
		MELBOURNE FL 32935	Remove
			Change
			Add
			□ Remove
			Change
			□ Add
			□ Remove
			Change
			Remove
			Change
			Add
			Remove
			Change

_	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
he re	cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of $2:01$ and $2:01$ a.m. on the earlier of $2:01$ a.m.
Dated	Signature of a member of a member
	Superior of the state of the st
	OLGA MEDINA Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00