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## **COVER LETTER**

TO: Registration Sect Division of Corpo			
subject: Тор	92 Transfer	ited Liability Company	
Bixision of Corporations  SPIRIECT: Topgz Transfer LC  Name of Limited Liability Company  The enclosed Articles of Amendment and feets) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Steven N Weed  Name of Person  Topaz Transfer  From Campany  100.44 S Ocean DX 702  Address  Jerse Beach FI 34457  Lemait address: to be used for future annual report notification)  For further information concerning this matter, please call:  Steven N Weed  Name of Person  Lemait address: to be used for future annual report notification)  For further information concerning this matter, please call:  Steven N Weed  Name of Person  Lemait address: to be used for future annual report notification)  For further information concerning this matter please call:  Steven N Weed  Name of Person  Lemait address: to be used for future annual report notification)  For further information concerning this matter please call:  Steven N Weed  Name of Person  Lemait address: to be used for future annual report notification)  For further information concerning this matter please call:  Steven N Weed  Name of Person  Lemait address: to be used for future annual report notification)  For further information concerning this matter please call:  Steven N Weed  Name of Person  Lemait address: to be used for future annual report notification)  For further information concerning this matter please call:  Steven N Weed  Name of Person  Lemait address: to be used for future annual report notification)			
Please return all correspone	fence concerning this matter (	to the following:	
		Transfer LLC Firm Company  Ocean Dr  Address  En Beach F	
For further information cor		o be used for future annual report notil	ication)
Steven 1	V Weed	at (772) 485 Area Code Daytime	5657 Felephone Sumber
I nelosed is a check for the	following amount:		
5.00 Filing Lec يحر [4]		Certified Copy	Certificate of Status & Certified Copy
Registrat	GADDRESS: ion Section of Corporations 6327	STREET/COURI Registration Section ✓ Division of Corpora Clifton Building	n

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

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_ <del>_</del>	~	FILLU
	27 Transfor	- L-46 HOV 15 PH 12: 03
(Name of the Lilii	ted Liability Company as it now appears on o (A Florida Limited Liability Company)	ur records.)
	(iv i fored transect fallomy Company)	- ALAN ATTARAMA - ALAN MESER 日本
The Articles of Organization for this Limited L	iability Company were filed on <u>3</u> -	4-19 and assigned
Florida document number LI9 0000	62098	
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	f the limited liability company here:	
The new name must be distinguishable and contain the v	ords "Limited Liability Company." the designat	ion "ELC" or the abbreviation "LLC"
Enter new principal offices address, if applic	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
	<del>313222</del> 377 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
B. If amending the registered agent and		records, enter the name of the nev
registered agent and/or the new registered o	fice address here:	
	•	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stv.	et address
	_	Florida
	City	/np 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>	Name	Address	Type of Action
AMBR	Steven N Weed	10044 S Ocean Dr 702	Add
		Jensen Beach FL 34951	□ Remove
			<b>®</b> Change
			□ Remove
			Change
			☐ Remove
			🗆 Change
			□ Add
			□ Remove
			Change
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			☐ Remove
			☐ Change
		<del> </del>	
			□ Remove
			□ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Nov. 14, 29:9
	Mus MucD
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00