L19000076612

(Req	uestor's Name)	
(Add	lress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



000341701750

03/13/28--01016--008 **25.00

2020 HAR 13 AH II: 49

HMLr

MAR 2 7 2020 I ALBRITTON:

COVER LETTER

TO: Registration So Division of Cor			
ELID ICCT	cnanaina	"TBLV 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:	
	Alecia	Soto	
		Name of Person	
	Ambiti	ous Reality	
		Firm/Company	
	420 Callo	awalk court Apt 3	805
	•	Address	
	<u>Davenpu</u>	rt FL 33896	
	المارية	City/State and Zip Code	
	<u> </u>	to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca		
Mocia Cata		.012 . 104_	In. 4 V.
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	-		
S25.00 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/COURIE	
	ration Section	Registration Section	1

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ARTICLES OF ORGANIZATION

OF

TBIV 1	LC Com.
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) liability Company)
The Articles of Organization for this Limited Liability Company	were filed on MARCH 18, 2019 and assigned
Florida document number <u>L190000 76612</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	
Ambitious Reality	LLC
The new name must be distinguishable and contain the words "Limited Liability and Contain the Words" and Contain the Words "Limited Liability and Contain the Words" and Contain the Words "Limited Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liabili	Hy 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)	120 Callawalk Court Apt 305
	Davenport, FL 33896
Enter new mailing address, if applicable:	same as above
(Mailing address MAY BE A POST OFFICE BOX)	
	·
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
•	cia Suto
New Registered Office Address: 420 C	allawale Court Apt 305 Enter Florida street address
Davenpo	City , Florida 33896

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 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
	Name N/A		
			☐ Remove
			Change
	·		Add
			Remove
		<u> </u>	Change
			□ Remove
			Change
			Add
			Remove
			Change
	·		Add
			Remove
			Change
			Add
			□ Remove
			Change

	
•	
	
•	
	- · · · · · · · · · · · · · · · · · · ·
lf an ef <u>Note:</u>	tive 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	January 28th 2020 Aleaalto
	Aleaalto
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00