# 1190000092077

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

APR 30 2019 T BCHROEDER

### **COVER LETTER**

TO: **Registration Section Division of Corporations** TAOSH LLC SUBJECT: \_\_\_\_\_ 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: Scott H. Holtz. Name of Person Prestia Holtz, P.A. Firm/Company 4343 10th Ave N. Ste. 3 Address Lake Worth, FL 33461 City/State and Zip Code sholtz@prestia-holtz.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Scott H. Holtz 561 360-3785 Daytime Telephone Number Name of Person Enclosed is a check for the following amount:

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

\$25.00 Filing Fee

☐ \$30.00 Filing Fee &

Certificate of Status

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

## STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee.

Certified Copy (additional copy is enclosed)

Certificate of Status &

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

# TO ARTICLES OF ORGANIZATION OF

TAOSH 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 and assigned L19000092077 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MX TAOSH LLC 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:

#### New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

City

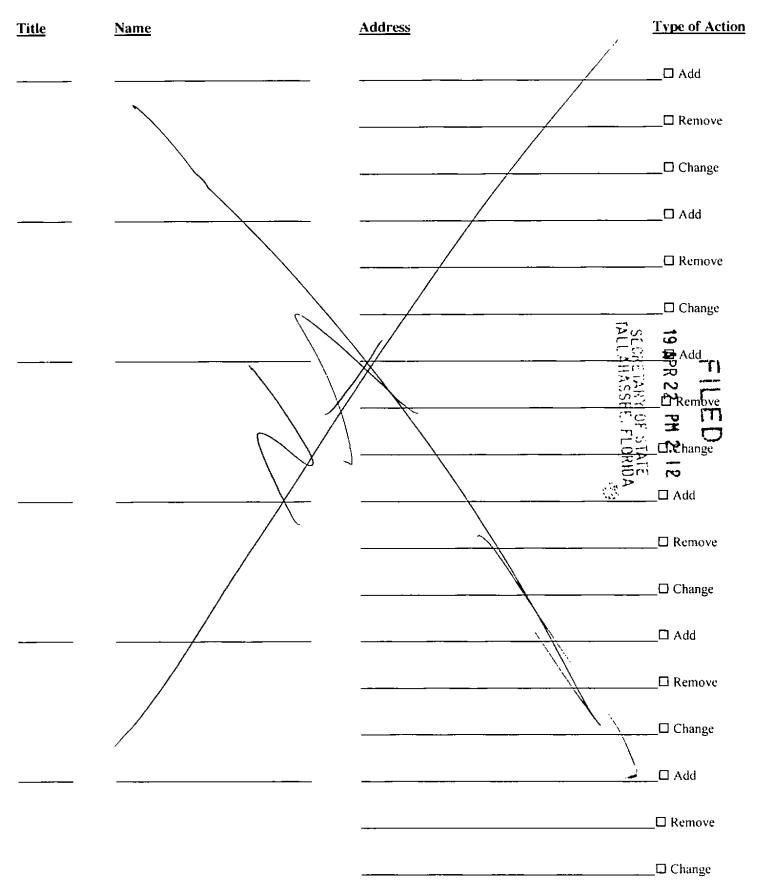
If Changing Registered Agent, Signature of New Registered Agent

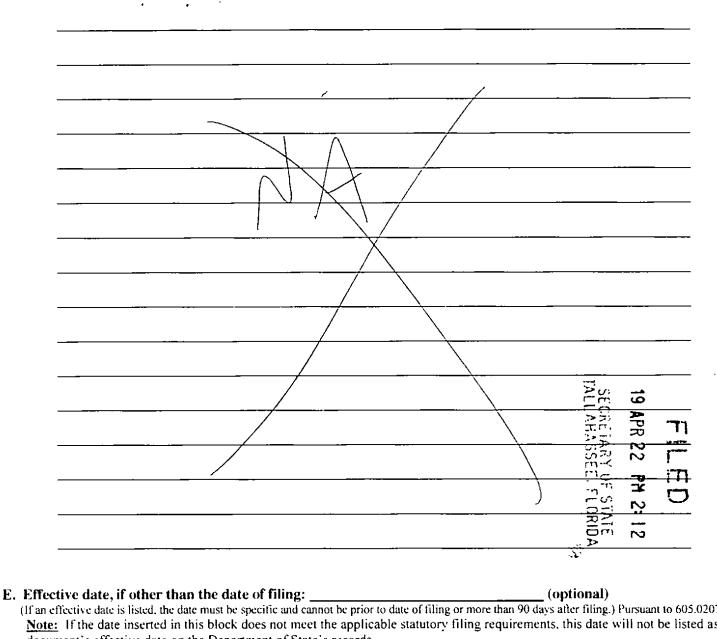
r Flori**d**a street address

## or removed from our records:

MGR = Manager

AMBR = Authorized Member





(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

2019 April 18 Dated Signature of a number or authorized representative of a member Scott H. Holtz Typed or printed name of signee

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Filing Fee: \$25.00