L19000130580

(Day and day Nama)
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Littly Name)
(Document Number)
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COVER LETTER

Division of Co		.	
TAMPA S	ANDPIPER GROUP, 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:	
	DINAH L SWICKEY		
		Name of Person	
	TAMPA SANDPIPER GR	OUP, LLC	
	(207.5.14.15) 43/17	Fiπn/Company	
	6207 S MAIN AVE		
	`TAMPA, FL 33611	Address	
	dswickey@gmail.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	ication)
For further information of	concerning this matter, please ca	all:	
Dinah Swickey		813 453-0905 at ()	
Name c	of Person	Area Code Daytime	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:

TO:

Registration Section

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

TAMPA SANDPIPER GROUP, LLC

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

	(A Florida Limited	Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L19000130580}{L19000130580}$.		were filed on 05/14/20)19	and assigned	
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liab	oility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designa	ntion "LLC" or the abbr	reviation "L.L.C."	
Enter new principal offices address, if appli	cable:			 	
(Principal office address MUST BE A STRE	ET ADDRESS)				
Enter new mailing address, if applicable:		6207 S Main Ave.	TALLAH	ZOIP AUG -	
(Mailing address MAY BE A POST OFFICE	· POV	Tampa, FL 33611	<i>y</i> :	0 — [
B. If amending the registered agent and	l/or registered o		records, enter the	Some of the n	
registered agent and/or the new registered of	office address her	<u>e</u> :			
Name of New Registered Agent:	Dinah Lang Sv	vickey	 .		
New Registered Office Address:	6207 S Main A	we.			
		Enter Florida sti	reet address		
	Tampa		Florida <u>³³⁶¹</u>	1	
		City		Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:	<u>.</u>			

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 ador removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
V.P.	Matthew R. Swickey		
		6207 S Main Ave.,	
		Tampa, FL 33611	■ Remove
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Effective date, if other that fan effective date is listed, the da Note: If the date inserted in a document's effective date on	this block does not m	wet the applical	o date of filing or mobile statutory filing	ore than 90 days afte	ional) r filing.) Pursuant to 60 is date will not be list	5.0207 ted as
no record specifies a de	layed effective d e record is filed.	ate, but not	an effective ti	me, at 12:01	a.m. on the earli	ier o
The 90th day after the	,	2019	_·			
The 90th day after the Dated August, 1	Signature of a n		_ ·	of a member		

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Filing Fee: \$25.00