L19000131551

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: TORI B. EUBANK	(S	
			
The enclosed <i>Articles a</i>	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
	TORI B. EUBANKS		
-	TORER FURANKS LLC	Name of Contact Person	
-	TORE E EODATAN, EEC	Firm/ Company	
	1437 MESA COURT	Time Company	
•	Name of Contact Person Area Code & Daytime Telephone Number nclosed is a check for the following amount made payable to the Florida Department of State:		
	ORANGE PARK, FL 32065		
•		City/ State and Zip Code	
TORIE	BEUBANKS@GMAIL.COM	1	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas		
TORI B. EUBANKS		at (
Name o	f Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
☐ \$35 Filing Fee		Certified Copy (Additional copy is	Certificate of Status Certified Copy (Additional Copy
Amer Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301



October 4, 2019

TORI B EUBANKS TORI B EUBANKS, LLC 1437 MESA COURT ORANGE PARK, FL 32065

SUBJECT: TORI B. EUBANKS, LLC

Ref. Number: L19000131551

We have received your document for TORI B. EUBANKS, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 019A00020490

Diane Cushing Senior Section Administrator

2019 OCT 21 AH 10:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOREB. EUDANNS, LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number L19000131551	mpany were filed on MAY 15, 2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
		10 TO
		1000
Enter new mailing address, if applicable:		- 1 2 ·
(Mailing address MAY BE A POST OFFICE BOX)		1 L
		H 5
		3 <u>2</u> 2
B. If amending the registered agent and/or registered agent and/or the new registered office addre		the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Code

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

TODED PUDANIZE LLO

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>	<u>Address</u>	Type of Action
MGR	JOSEFINA EUBANKS	1437 MESA COURT ORANGE PARK, FL 32065	
			□ Remove
		 .	☐ Change
AMBR	TORI B. EUBANKS II	1437 MESA COURT ORANGE PARK, FL 32065	D Add
			Remove
			Change
AMBR	TIARA B. EUBANKS	1437 MESA COURT ORANGE PARK, FL 32065	Add
			■ Remove
		-	Change
			☐ Remove
			Change
			Add
			Remove
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an effect lote: If	ive date is listed, the dath the date inserted in t		annot be prior to date of the applicable sta	of filing or more than	(optional) 90 days after filing.) Purst ements, this date will n	
	rd specifies a de Oth day after the		te, but not an e	ffective time, a	t 12:01 a.m. on th	ne earlier o
oted O	CTOBER 16		2019	~ ~		
		()ou	: B. El	Zans		
	-	Signature of a me	inher or authorized re	presentative of a mei	nber	

Page 3 of 3

Typed or printed name of signce

Filing Fee: \$25.00