L19000143261

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , ,
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TO:

Registration Section

Division of Corp	orations		
SUBJECT:			
	Name of Lin	nited Liability Company	
The england Assistant A		in the mi	
The enclosed Articles of A	amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	BUNNU	Sue Montford	- 850
		Time 08	
		Firm/Company	
	3204 V	Nindmill Circle	<u> </u>
	_		
	<u>Canton me</u>	H, FL 3253 City/State and Zip Code	3
	Ounny (SUR 07 @ Vah 00 to be used for future annual report not	. Com
For further information co	neerning this matter, please o	•	·····,
Bunny Sue	montford		0-7510
'Name of I	Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	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)
<u>Mailing Address:</u> Registration Se		Street Address:	otion
Division of Co		Registration Se Division of Co	
P.O. Box 6327		The Centre of 7	Tallahassee
Tallahassee, FI	J 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Turtle Time 08, LLC	·	
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our i ted Liability Company)	records.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L19000143261</u> .	any were filed on05	29 2019 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
AIN		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NA	
(Principal office address MUST BE A STREET ADDRESS	2	
77		
Enter new mailing address, if applicable:	NIU	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records,	enter the name of the new regis
Name of New Registered Agent: NA		
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	
	Enter Florida street	address
	City	, Florida
New Registered Agent's Signature, if changing Registered Ag	•	zap com
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	agree to act in this capacity lete performance of my dutt as provided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document i

N A

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
NGR	Bryan K. Montford	3204 Windmill Circle	□ Add
		Contonment, FL 32533	Remove
			□Change
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			□Remove
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	·
(If an ci Note:	tive date, if other than the date of filing: 04-06-2024 (optional) fective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the nent's effective date on the Department of State's records.
e reco rd is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after iled.
Dated	04-04-2024 Signature of a member or authorized representative of a member
	Manager - Bunnysue Montford

Filing Fee: \$25.00