# L19000 146 744

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07/19/19--C10.1 No. \*\* No.1.



JUL 25 2019 C. Kinsey

## **COVER LETTER**

Division of Corporations
SUBJECT: Tee HELP LLC  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:
Daniel Wheeler Name of Person
Tree HELPI LLC
162 Woodin Rol @
Carrabelle FL 37372
Hamaladdress: (to be used for future annual report notification)
For further information concerning this matter, please call:
Daniel Wheeler at (850) 570-6859  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee

### 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, Ft. 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit	ed Liability Company as (A Florida Limited Liabili	it now appears on o	ur records.)	
The Articles of Organization for this Limited Li Florida document number <u>L 19 000 \ 41</u>	ability Company were	1/2	/19	and assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liability	company here:		
The new name must be distinguishable and contain the w Enter new principal offices address, if applic (Principal office address MUST BE A STREE	able:	ompany," the designa	ion "LLC" or the a	bbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>		.,	SECIAL MASSEE
B. If amending the registered agent and/ registered agent and/or the new registered of	4,*	address on our	records, enter	the name of the new
Name of New Registered Agent:	Hannah	Oxendir	<u> </u>	
New Registered Office Address:	<b>b</b> 20)	Enter Florida str	et address	<u> 1667                                  </u>
	Carrabelle	Üţy	, Florida	32322 Zip Code

### 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.

f 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>	Address Type of Action
MCZ	Daniel Wheeler	162 Woodil Rd Carra boile FL 32322
		Remove
<u>Ambl</u>	Austin Hatkax	Moz wooding Rd Carrobelle Fr 32322
		Remove
		Change
		Add
		Remove
		Change
		Remove
		Change
		Remove
		Change
		Remove
		Changes

AUS+	other information, e	Hathcox	will be	_	<u>Owner</u>
<u>a-</u>	Tree	HELP! L	LC.		
Dan 75%	iel Tren	t Wheele Tree HE	r Win	naw be	<u>anning</u>
		-1			
lan effective date is <b>Sote:</b> If the date i	other than the date of isted, the date must be spenserted in this block down date on the Department	cific and cannot be prior t es not meet the applica	o date of filing or more t ble statutory filing red	(optional) han 90 days after (filing.) quirements, this date v	Pursuant to 605.0207 will not be listed as
	ies a delayed effect after the record is		an effective time	e, at 12:01 a.m. (	on the earlier of
Dated <u>F/1</u>	6/19 cent N	Ire of a member or author	ized representative of a	member	
Da	niel T	rent h	(heele		

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Filing Fee: \$25.00