L19000 235913

(Re	questor's Name)		
(Ad	dress)	-	
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:		

Office Use Only



500352375565

09/28/20--01018--020 **25.00



COVER LETTER

TO:	Registration Section Division of Corporations
SUBJEC	CT: BREVARD TDV LLC Name of Limited Liability Company
The encl	losed Articles of Amendment and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
	WALLIACE R. COOK Name of Person
	S100 PM Firm/Company
	PO BOX 5-62725 Address
	ROCKLEDGE, FL. 32956 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
w	Name of Person at (321) 863-2869 Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
图 \$25.0	00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BREVARD TDY, 120	2			
REVARD TD4, 11.0 (Name of the Limited Liability Compa) (A Florida Limited L	nv as it now appears on our liability Company)	records.)		_
The Articles of Organization for this Limited Liability Company			and	assigned
Florida document number 119000 35913.			and	assignen
Florida document number $\frac{1.19000835913}{1.19000235913}$. This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	lity company here:			
_ NIA	· ·			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation	"LLC" or the ab	breviation	"L.L.C."
Enter new principal offices address, if applicable:	NIA	****		
(Principal office address MUST BE A STREET ADDRESS)			100 100 100 100 100 100 100 100 100 100	
		7- 12-		
		391	~; ≪;	1
Enter new mailing address, if applicable:	N/A	77 44 77 44 1 19	7.0	Ti
(Mailing address MAY BE A POST OFFICE BOX)			-0i	
		3.	و د ا رئ	
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>s</u>	enter the nam	e of the i	new registered
Name of New Registered Agent: W//	7			
New Registered Office Address:				
	Enter Florida street address			
		_, Florida		
	City		Zin Cac	de

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.

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 Title <u>Name</u> Address Type of Action MGR WALLACE R. COOK _____ □ Change ______ □Remove _____ □Change _____ DRemove _____ □Remove

_____ □Change

______ □Remove

______ □Add

_	
_	
_	
_	
-	
-	
_	
_	
_	
_	
_	
ectiv	ve date, if other than the date of filing:
CHO	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing or more than 90 days after filing and cannot be prior to date of filing and cannot be prior to date
	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nt's effective date on the Department of State's records.
	•
cord	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
file	d.
ed_	9/28, 2020 Judice a. Cook Signature of a member or authorized representative of a member
	$\bigcap_{i \in I} f_i = f_i$
	Signature of a member or outhorized and
	O a member of a member of authorized representative of a member
	Judith A Cook