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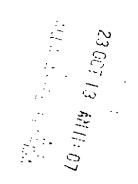
(Re	questor's Name)	<u> </u>
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☐ ÞICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
	J. HOF	RNE
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10/13/23--01007--008 **25.00



COVER LETTER

TO:	Registration Sec Division of Corp					
SUBJE(CT:	TOMMASI	AND SONS LLC			
		Name of Lim	ited Liability Company	<u> </u>		
The enc	losed Articles of a	Amendment and fee(s) are sub	mitted for filing,			
Please re	cturn all correspor	ndence concerning this matter	to the following:			
			DIEGO MURILLO			
			Name of Person			
		то	MMASI AND SONS LLC			
Firm/Company			Firm/Company			
		696.	6965 PIAZZA GRANDE AVE. 306			
			Address			
		ORL	ANDO, FL 32835			
			City/State and Zip Code			
			@GMAIL.COM	·		
			o be used for future annual report not	ification)		
For furth	er information co	ncerning this matter, please ca	II :			
DIEGO MURILLO		718 312-2376				
	Name of	Person	at ()at ()at ()	e Telephone Number		
Enclosed	l is a check for the	tollowing 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:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOMMASI AND SONS LLC

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

The Articles of Organization for this Limited Liability Con	npany were filed on 09/26/2019	and assigned
Florida document numberL19000243459		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
DAMN PHANTHOM LLC		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>	
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	ffice address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:	-	
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
	City	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.

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
<u>_</u>			□ Add
			□Remove
			□Change
			🗆 Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

. If amen	ding any other information,	enter change(s) here:	(Attach additional shee	ts, if necessary.)	
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(If an effect Note: If	e date, if other than the date ive date is listed, the date must be specified the date inserted in this block dates effective date on the Department	pecific and cannot be prior to d loes not meet the applicable	date of filing or more than 90 c statutory filing requiren	(optional) days after filing.) Pursuant to 6 nents, this date will not be li	05.0207 (3) sted as the
the record s cord is filed	specifies a delayed effective date.	e, but not an effective time.	, at 12:01 a.m. on the earl	lier of: (b) The 90th day af	ter the
Dated	SEPTEMBER 07	2023	,		
	Att				
	Signa	ature of a member or authorize	ed representative of a memb	ier	
		DIEGO MURILLO			
		Typed or printed n	name of signee		

Filing Fee: \$25.00