L200000 47371

(Re	equestor's Name)	·
(Ac	ddress)	<u></u>
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
:		
_		

Office Use Only



100341215651

02/28/20--01020--029 **25.00



MAR 19 2003

COVER LETTER

TO: Registration Se Division of Cor	porations		
SUBJECT:	Name of Lim	16/ding5	LLC_
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	The	Vago Voledo)
		Firm/Company	
	608	8 LEE Ann L	. <i>N</i>
	<i>Na</i>	Address Address Address City/Stafe and Zip Code	09
	E-mail address: (to be used for future annual report notif	ication)
For further information co	oncerning this matter, please c	all:	
Thiaso	Toledo	at (239) 293. Area Code Daytime	2522 Telephone Number
Enclosed is a check for th	ne following amount:		
X \$25.00 Filing Fee	☐ \$39.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres	x:	Street 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

TDO HO	Idings LLO	
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears or la Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability of Florida document number		2/10/20 and assigned
This amendment is submitted to amend the following:	 -	
This afficient is submitted to afficing the following.		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
, and the second		M-1
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD.	<u> </u>	· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
		- α
Enter new mailing address, if applicable:		<u></u>
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our reco	rds, enter the name of the new registered
agent and of the new registered office address nere.		
Name of New Registered Agent:	_	
New Registered Office Address:		
	Enter Florida .	street address
		, Florida
	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 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>	Name	Address	Type of Action
AMBR	Flavio Toledo	260 16Th AVE NW	IAdd
		260 16Th AVE NW Naples, 1-6 34120	□Remove
			□Change
			□Add
			□Remove
		 	□ Change
			🗆 Add
			□R2move
			Change_
		(F)	Add T
			Change
			□Add
			□Remove
			Change
			🗆 Add
			□Remove
			□ Change

Page 2 of 3

	·	
	>	
		20
		<u> </u>
	:	<u>ထိ</u>
		. ∋ <u>. ģ. </u> ,
	<u> </u>	
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicate occument's effective date on the Department of State's records.	o date of filing or more than 90 days after filing.) Pure ble statutory filing requirements, this date will	suant to 605.0 not be listed
e record specifies a delayed effective date, but not The 90th day after the record is filed.		:he earlier
ated February 10, 2020	_· >	
MI	4 /•	

Page 3 of 3

Filing Fee: \$25.00