LZO 000070100

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OCT 13 2020 T. LEMIEUX

COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: TH	CK & Thin C Name of Lim	ollection ited Liability Company		
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
		Tawani a	Reese	
	TH	Name of Person ICK Thin Firm/Company	Collecti	0 <i>r</i>)
	1112 Versai		204	
	Brandon,	FL 33511 City/State and Zip Coc		
	thickand E-mail address:	thin collecti	ion a gmo al report notification)	ul. com
For further information co	oncerning this matter, please co	all:		
Tawar Name of	nia Reese Person	at (<u>352</u>)_ Area Code)_	342-498 Daytime Telepho	
Enclosed is a check for th	e following amount:			
▼ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fe Certified Copy tadditional copy is o		\$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
31 92 - 444 - 4		6.		

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

THICK EThin Collection ullity Company as it now appears on our records.) ida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number __ L2 0000670100 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 😽

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.

City

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
MGR	Margie Sancho-Home	ers 10103 Crested Fringe 1	Or □Add
	U	Riverview, FL 33578	Remove
			□Change
			🗆 Add
		-	Remove
			🗆 Change
			□Add
			□Remove
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(If an effective 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 6 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be li document's effective date on the Department of State's records.	605,0207 (3) isted as the
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day af ford is filed.	fter the
Dated August 28 2020	
Signature of a member or authorized representative of a member	
Tawania Leese	