L20000087157

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400353162114

10/05/20--01018--014 **30.00

7000 C 11-5 (Li 10: 52

C. GOLDEN NOV 1 3 2020

COVER LETTER

TO:

TO: Registration Se Division of Cor			
	DUCTS INTERNATIONAL.	LLC	•
SUBJECT:	Name of Lim	ited Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ANTHONY DEJESUS		
		Name of Person	
	TRUE PRODUCTS INTE	RNATIONAL, LLC	
	<u> </u>	Firm/Company	
	7259 BRIELLA DRIVE		
		Address	
	BOYNTON BEACH, FL	33437	
		City/State and Zip Code	
	anthony@trueproductsintl.c		
For further information c	E-mail address: (concerning this matter, please c	to be used for future annual report no all:	tilication)
ANTHONY DEJESUS	,	561 859-4990	
Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for the	he following 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)
<u>Mailing Addre</u> Registration		Street Address: Registration S	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee,	r.L. 52514	2410 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

TRUE PRODUCTS INTERNATIONAL LLC

٠.	•	f	٠.	-5		:[0]	_	2
				_				

	DE PRODUCTS INTERNATIONAL, LEC	=	
(<u>Name of the Lin</u>	nited Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Florida document number	Liability Company were filed on	03/23/2020	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company he	ere:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	lesignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:	- POV		
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE</u> 3. If amending the registered agent and/or	registered office address on our reess here:	ecords, <u>enter the</u> nai	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE</u> 3. If amending the registered agent and/or	registered office address on our re		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or gent and/or the new registered office addre	registered office address on our reess here: Adriana Cynthia Linsalato	ecords, <u>enter the</u> nai	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or agent and/or the new registered office address and the second secon	registered office address on our reess here: Adriana Cynthia Linsalato		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or agent and/or the new registered office address and the second secon	registered office address on our reess here: Adriana Cynthia Linsalato Enter Flori	ecords, <u>enter the</u> nai	me of the new regi

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
P	ADRIANA CYNTHIA LINSALATO	7 MERRIT AVENUE MILLBROOK, NY	= Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			🗀 Remove
			□ Change
			□Add
			□Remove
			□Change
			□∧dd
			□Remove
			□Change
			□∧dd
			□Remove
			□ Change

	The additional member will have controling interest in True Products International, LLC of 95%.
-	
,	
-	
•	
-	
_	
-	
-	
-	
-	
_	
-	
_	
-	
r 4.	SEPTEMBER 28,2020
n effi	ective 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 605 (200)
ite:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as em's effective date on the Department of State's records.
unn.	are selective date of the recpartment of state's records.
cum	
CHIR	Specifies a delayed afflictive data but not an ethal and a 12 at
core	I 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 ed.
CHIR	I 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 ed.
ecore	I 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 ed.
ecore	eu.
ecore	edi.
ecore	eu.