

L20000094010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

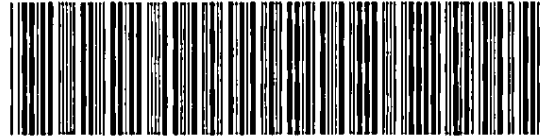
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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300362420523
03/01/21--01025--002 **10.00

300362420523
03/01/21--01025--001 **50.00

FILED
2021 MAR 24 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FL

APR 07 2021

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tax Lien Property Solutions LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Latasha Holmes
Name of Person

Firm/Company

755 S LB Brown Ave
Address

Barrow FL 33830
City/State and Zip Code

latasha1998@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Latasha Holmes at (863) 409-9687
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

previously paid

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

SECRETARY OF STATE
TALLAHASSEE, FL

2021 MAR 24 PM 4:57

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2021 MAR 24 PM 4:57



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 3, 2021

THE NOTARY QUEEN
755 S.L.B. BROWN AVE
BARTOW, FL 33830

03012101025001
03012101025002

Subject: **THE NOTARY QUEEN**
RE: 221A00004538

We have received your document for the above Fictitious Name and your check(s) totaling \$60.00; however, the document **has not been filed** and is being returned for the following:

The number listed in section 4 of the document is for an LLC. You cannot change the name of an LLC on a fictitious name form. If you want to change the name of the LLC, you will need to file an amendment.

Should you have any questions regarding this matter you may contact our office at (850) 245-6058.

RUSSELL L HUNT
Reinstatement Section
Division of Corporations

Letter No. 221A00004538

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Tax Lien Property Solutions, LLC

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

FILED
2021 MAR 24 PM 4:51
SECRETARY OF STATE
FLORIDA

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
Florida document number L20000094010

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The Notary Queen, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

_____, 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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[illegible]

(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 605.0207 (3)(b)

If 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 after the record is filed.

Tatashi Kubota
Signature of a member or authorized representative

Latqshq Holmes

Filing Fee: \$25.00