## L20000097717

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## **COVER LETTER**

TO: Registration Division of C	Section Corporations		
SUBJECT:	Tamou	Bro LLC	
JOBSEC 1	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
		Name of Person	rd
		Firm/Company	
	1911 T	angled Vine	Dr
	<u>wester</u>	City/State and Zip Code	33643
	E-mail address: (i	O HUMDOL - DN to be used for future annual report notif	ication)
For further informatio	n concerning this matter, please ca	all:	
Nam	ne of Person	at (212) 899 Area Code Daytime	- Cl 268 Telephone Number
Enclosed is a check for	or 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)
Mailing Add Registration		<u>Street Address:</u> Registration Sec Division of Corp	

P.O. Box 6327 Tallahassee, FL 32314

TO:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(Name of the Limited Liability Com	Dany as it now appears on our records.
(A Florida Limite	ngany as it now appears on our records.)  d Liability Company)
The Articles of Organization for this Limited Liability Comparison document number <u>L2000097717</u> .	ny were filed on $04-06-20$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ability company here:
NIA	
The new name must be distinguishable and contain the words "Limited Lia	ability 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)	1911 Tangledvine Dr Wesley Chapel Fi 33543
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18350 Amberry Dr Unit 2923 Tampa FL 33647
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, enter the name of the new registered
Name of New Registered Agent:	y Matthews
New Registered Office Address: 57	30 Tortoise PL  Enter Florida street address
_Ap	MO Beach, Florida 35672
Now Registered Agent's Signature if changing Registered Agen	. ,

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AB	Ashley M. Valen	808 N. Franklin	St □Add
		Unit 3412	Remove
		Tampa fl 33602	□Change
AP	Ernesto Tamay	p 1906 Gregory D	□Add
		Tampa A 3361	3 Remove
			□Change
MGR	Danielle Zypad	h 15350 Amberly D	☐ □Add
	, and the second	Unit 2919	□Remove
		Tampa Pl 33647	Schange
			□Add
			□Remove
			□Add
		<del></del>	□Remove
			□Change
<del></del>	<del></del>		□Add
			🗖 Remove
			□Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an e	effective date, if other than the date of filing:
the reco	ord 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 filed.
Date	24 JWE 2020
	9 M 1
	// I M / .
	Signature of a member or authorized representative of a member