LZ0000108563

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10/15/20--01010--003 **25.00

11/15/20

FILED 2020 OCT 15 PM 5: 13

CLIBICOT	perties, LLC		
30b)LC1	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	John K Peterson		
		Name of Person	
	TBFL Properties, LLC		
		Firm/Company	
	175 1st Street S, Unit 804		
		Address	
	St Petersburg, FL 33701		
		City/State and Zip Code	
	jkenpeterson@gmail.com		
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
John K Peterson		727 479-5902 at ()	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	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)
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 7 2415 N. Monro	rporations

Tallahassee, FL 32303

Registration Section
Division of Corporations

TO:

TO ARTICLES OF ORGANIZATION **OF**

company has been notified in writing of this change.

ТО		MN OCT 15 PH 5: 13 and assigned	
ARTICLES OF ORGANIZA	TION 1	100	
OF			
	•	1 5 M	
TBFL Properties, LLC		30	
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company)	<u>ars on our records.</u>))	~ U	
	/ 2.0 / 2.0 2.0	<u>ر</u> ي -	
The Articles of Organization for this Limited Liability Company were filed on $\frac{0}{2}$	4/20/2020	and assigne	
Florida document number L20000108563			
This amendment is submitted to amend the following:			
_			
A. If amending name, enter the new name of the limited liability company l	<u>iere</u> :		
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the abb	reviation "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)			
R. If amonding the registered agent and/or registered affice address on our		£4E.	
B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here:	records, enter the name	of the new regi	
Name of Marc Paristant J. A., and			
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:			
Enter Flo	orida 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	comacity I further some	oo ta zamala wi	
provisions of all statutes relative to the proper and complete performance o			

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Act
MGR	John K Peterson	175 1st Street S, Unit 804	Eledd C
		St Petersburg, FL 33701	Remoye
AMBR Joh	John K Peterson	175 1st Street S, Unit 804	بن Change _ ■Add
		St Petersburg, FL 33701	□Remove
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	11/02/2020
ffect	ive date, if other than the date of filing:
an eff ofe:	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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list
ocum	nent's effective date on the Department of State's records.
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
is ti	led.
ated	October 12 2020
	——————————————————————————————————————

Typed or printed name of signee