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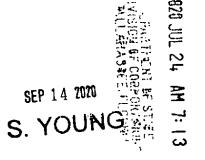
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COVER LETTER

TO:

Registration Section Division of Corporations

TREE HO	OUSE DYNAMICS LLC					
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.				
Please return all corresp	oondence concerning this matter	to the following:				
	FRANK A PEZZO SR					
		Name of Person				
	TREE HOUSE DYNAMICS LLC					
		Firm/Company				
255 SHERWOOD FOREST DR						
Address						
DELRAY BEACH, FLORIDA 33445						
		City/State and Zip Code				
	FAPEZZO@GMAIL.COM					
	E-mail address: (to be used for future annual report noti	fication)			
For further information	concerning this matter, please ca	all:				
FRANK A PEZZO SR		561 8591935 at ()				
Name	of Person		e 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)			
Mailing Addre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Callahassee e Street, Suite 810			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TREE HOUSE DYNAMICS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on APRII. 27,2020 Florida document number L20000113279 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 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>	Address	Type of Action
MGR	FRANK A PEZZO SR	255 SHERWOOD FOREST DR	■Add
		DELRAY BEACH, FLORIDA 33445	□Remove
			Change
			□Add
			□Remove
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Tective date, if other than the on effective date is listed, the date must ote: If the date inserted in this bloocument's effective date on the De	t be specific and cannot be prock does not meet the app	rior to date of tiling or n plicable statutory filir		ing.) Pursuant to 605.0207
ecord specifies a delayed effective is filed.	e date, but not an effectiv	e time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
nted JULY 07	2020			
	 ' -	 '		
() Regi	Signature of a member or a			