# L20000175758

| (R                      | equestor's Name)   |             |
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| (A                      | ddress)            |             |
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| PICK-UP                 | ☐ WAIT             | MAIL        |
| (B                      | usiness Entity Nar | me)         |
| (D                      | ocument Number)    |             |
| Certified Copies        | Certificates       | s of Status |
| Special Instructions to | Filing Officer:    |             |
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 26, 2021

BLANCA ZAMBRANO 1560 SAWGRASS CORPORATE PKWY 4TH FLOOR OFC 499 SUNRISE, FL 33323

SUBJECT: TANYA BRILLEMBOURGH PARTNERS, LLC

Ref. Number: L20000175758

We have received your document for TANYA BRILLEMBOURGH PARTNERS, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers Regulatory Specialist II

Letter Number: 321A00008614

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#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TANYA BRILLEMBOURGH PARTNERS, 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  $\underline{{}^{\mathrm{FLORIDA}}}$ and assigned Florida document number \_\_1.20000175758 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TANYA BRILLEMBOURG PARTNERS, LLC 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.

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> | Name | Address | Type of Action |
|--------------|------|---------|----------------|
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|                                      | other information, enter change(s) here: (Attach additional sheets, if necessary.)  |                   |
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|                                      | (optional)  |                   |
| (If an effective date                | if other than the date of filing: (optional) is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 te inserted in this block does not meet the applicable statutory filing requirements, this date will not be listerity date on the Department of State's records. | 5,0207<br>sted as |
| the record specific<br>ord is filed. | es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day aft   | ter the           |
| MARCI                                | 2021  |                   |
| Dated                                | $\frac{1}{240}$   |                   |
|                                      | // <del></del> / / / / /  |                   |
|                                      | Signature of a member of authorized representative of a member  |                   |

Filing Fee: \$25.00