K20 COO 176324

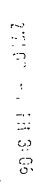
(Requestor's Name)
(Address)
(Addiess)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Caralla Caralla Caral
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





100374155921

10/04/21--01027--013 *+25.00



COVER LETTER

TO:

Registration Section

Division of Cor	porations		
	ERLIN LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
riease return an correspo	ondence concerning this matter	to the following:	
	Amber Summerlin		
		Name of Person	
	TONALLBERLIN LLC		
	-	Firm/Company	
	45 Patterson St		
	· · · · ·	Address	 -
	Mulbery, FL. 33860		
		City/State and Zip Code	
	AmberSummerlin03@gmai		(6
		to be used for future annual report not	incation)
For further information of	oncerning this matter, please c	all:	
Amber Summerlin		863 944-2793	
Name o	f Person	at () Area Code Daytim	ne Telephone Number
Enclosed is a check for the	he following amount:		
≅ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration of Control Division of Control P.O. Box 632 Tallahassec,	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of Toraction Se 2415 N. Monro Tallahassee, FL	rporations Fallahassee se Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tonallberlin LLC.		
(Name of the Limited Li (A Fl	iability Company as it now appears on our records.) Iorida Limited Liability Company)	
The Articles of Organization for this Limited Liabili	ity Company were filed on 06/24/2020	and assigned
Florida document number L20000176324		
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
Principal office address MUST BE A STREET AL	DDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX	<u></u>	
	<u></u>	
R. If amonding the registered agent and/or regist	stered office address on our records, <u>enter the nar</u>	ne of the new register
agent and/or the new registered office address he		ne of the new register
Name of New Registered Agent:		
New Registered Office Address:) [5]
	Enter Florida street address	B
	, Florida	1
_	City	Zip Code
New Registered Agent's Signature, if changing Regis	stered Agent:	
	gent and agree to act in this capacity. I further a	
accept the obligations of my position as registere		
being filed to merely reflect a change in the regis	istored office address. I hereby confirm that the li	mited liability
New Registered Office Address: New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agenty or ovisions of all statutes relative to the proper and the proper a	City stered Agent: gent and agree to act in this capacity. I further agend complete performance of my duties, and I amed agent as provided for in Chapter 605, F.S. Or	gree to comply w familiar with an

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
AMBR	Amber Summerlin	45 Patterson St. Mulberry, Fl. 33860	= Add
			□Remove
			[]Change
			□Remove
			□Change
			□Remove
			□ Change
			□Add
			Remove
			□Change
			□Add
		urann	□Remove
			□Change
			□Add
			□Remove
			□Change

Page 2 of 3

_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
_	<u> </u>
_	
_	
_	· · · · · · · · · · · · · · · · · · ·
_	
Effecti	ve date, if other than the date of filing: (optional)
(If an effe	ctive 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 605.020 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docume	ent's effective date on the Department of State's records.
he rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o
The	90th day after the record is filed.
	2021
Dated]	September 27 2021 .
	mal.
	1 mel
	Signature of a member or authorized representative of a member
	Amber Summerlin
	Typed or printed name of signee