LZO 000187020

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(2.1.), 2.1.1.2.2.1.,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FILEU 2020 NOV 16 PH 4: 04

12/18/20

TYDI Cons	sulting LLC	, ,	
	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ondence concerning this matter t	o the following:	
	Diane Young		
	_	Name of Person	
	TYDI Consulting LLC		
		Firm/Company	
	700 East Boynton Beach Bl	vd	
		Address	
	PH-7		
		City/State and Zip Code	
	Boynton Beach, Florida 33-		
		be used for future annual report:	notification)
For further information c	oncerning this matter, please ca	H:	
Diane Young		561 914-6188 at ()	
Name o	d Person	Area Code Day	time Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy radditional copy is enclosed:
<u>Mailing Addres</u> Registration S		<u>Street Address</u> Registration	
Division of C		Division of C	

P.O. Box 6327 Tallahassee, FL 32314

Registration Section

Division of Corporations

TO:

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

ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	i <mark>ny as it now ap</mark> p Liability Compan	pears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000187020</u> .	were filed on	7/2/2020	and assig
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liah	ility company	here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," tl	ne designation "LLC" or	
Enter new principal offices address, if applicable:	Same	NIA	2020 NOV 1.6
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	
			<u> </u>
Enter new mailing address, if applicable:	Some	N/A	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			+
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on ou	r records, <u>enter the</u>	name of the new t
Name of New Registered Agent:			
New Registered Office Address:	Enter I	Florida street address	
	•		
	City	Floric	la Ziv Code

New Registered Agent's Signature, if changing Registered Agent:

TYDI Consulting LLC

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documbeing 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 Changing Registered Agent, Signature of New Registered Agent

, or removed from our records.

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of A
AMBR	Diane M. Young	700 East Boynton Beach Blvd. PH-7	= Add
		Boynton Beach, Florida 33435	□Remo
			□Chang
AR	Diane M. Young		□Add
		 	= Remo
			A hang
AR	Tayler L. Young		140 NO
			Remo
			 2 ☐Chang
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			□Chang
			□Add
			□Remo
			□Chang
			□Add
			□Remo
			Chang

Tayler L. Young is to be	completly Removed	
	-	
		6
		
		L ₄
		
ffective date, if other that an effective date is listed, the da lote: If the date inserted in the	the date of filing: must be specific and cannot be prior to date of filing or more this block does not meet the applicable statutory filing req	(optional) kur 90 days after filing.) Pursuant to o utirements, this date will not be l
	ne Department of State's records.	
record specifies a delayed ef Lis filed.	ective date, but not an effective time, at 12:01 a.m. on th	e earlier of: (b) The 90th day a
ris rited.		
November 11	2020	
arcu		
	Signature of a member or authorized representative of a	
<u></u>	Lano ourly	

Filing Fee: \$25.00