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DIVISION OF CORPORATIONS
TALLAMASSEE, FLORIDA

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

10/12/20

NAME: TJ ALTAMONTE LLC

TYPE OF FILING: AMENDMENT

COST:

\$25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

on 12 /6H:37

TJ ALTAMONTE 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  $0^{9/30/2020}$ and assigned Florida document number \_\_\_\_\_L20000297955 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 "L.L.C." 515 East Altamonte Drive, #1025 Enter new principal offices address, if applicable: Altamonte Springs, FL 32701 (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 \_, Florida \_ Cirv 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

If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Name</u>	Address	Type of Action
AMBR	TJ Management HoldCo LLC	3654 Georgia Avenue	<b>=</b> Add
		West Palm Beach, FL 33405	□Remove
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Effective date, if other than If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	s block does not	t meet the applic	able statutory fil	more than 90 days at ing requirements,	otional) Aer filing.) Pursuant t this date will not be	o 605.0207 ( e listed as t
e record specifies a delayed efferd is filed.	ctive date, but no	ot an effective ti	me, at 12:01 a.m	n, on the earlier of:	(b) The 90th day	after the
Dated October 9		2020	·			
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// Mm/	11-					_
Jun!	Signature of	a member or autho	orized representati	ve of a member	<del></del>	_

Filing Fee: \$25.00