LZ0000318776

(Requestor's Name)
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,
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:





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10/29/20--01010--007 **25.00

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COVER LETTER

TO:

TO: Registration Se Division of Cor				
	gement LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Aracelsy Zumeta			
		Name of Person		
	T2A Management LLC			
		Firm/Company		
	2841 SW 83rd Avenue, #1	06		
		Address		
	Miramar, FL 33025			
		City/State and Zip Code		
	t2amgmt@gmail.com	to be used for future annual report notil	(*·	
For further information o	concerning this matter, please co		ication)	
Aracelys Zumeta		305 846-0555 at ()		
Name o	of Person	Area Code Daytime	e Telephone Number	
Enclosed is a check for the	he 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 Address		Street Address:	ation	
Registration Section Division of Corporations			Registration Section Division of Corporations	
P.O. Box 632	27	The Centre of T	allahassee	
Tallahassee,	FL 32314	2415 N. Monroe	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

T2A Management LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) Florida document number 1.20000318776 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." 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

Florida

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	Aracelys Zumeta	2841 SW 83rd Avenue, #106	≣Add
		Miramar, FL 33025	□Remove
			□ Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
		-	□Remove
			□Change
			□Add
			□ Remove
			□Change

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Filing Fee: \$25.00