120000326207

(Requestor's Name) (Address)	
(Address)	900354448779
(City/State/Zip/Phone #)	
(Business Entity Name)	10/30/2801014016 **30.00
(Document Number)	
Certified Copies Certificates of Status	202
Special Instructions to Filing Officer:	FILED FILED 12/8/20
	12/8/20

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. COVER LETTER

Registration Section

TO:

Division of Cor	porations		
T. J. BERG SUBJECT:			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Toni Texter		
		Name of Person	
	Document Preparer		
		Firm/Company	
	1945 Avocado Dr.		
		Address	-
	Port Orange, FL 32128		
	tstrange011@gmail.com	City/State and Zip Code	
		to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	
Toni Texter			т 386-255-1709
Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	S30.00 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 Addres Registration S		Street Address: Registration S	ection
Division of C	orporations	Division of Co	orporations
P.O. Box 632		The Centre of 2415 N. Mont	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

T.J. BERGMAN, LLC		
(<u>Name of the Limited Liability Comp</u> e (A Florida Limited	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L20000326207	were filed on October 14, 2020	and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab T.J. BERGMANN, LLC The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable:	ility company here:	202
ſ.J. BERGMANN, LLC		3000
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	c abbreviations L.I.T.
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	5410 S. Williamson BL. Ap	ot. 10114
	Port Orange, FL 32128	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	rmer runtaa sireet aaaress	
	, Florida	Zin Coda
	City	Zip Code

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.

				
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ffective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the De	t be specific and cannot be prior to date on the specific and cannot be prior to date on the specific able stated the specific and cannot be specificable an	(option of filing or more than 90 days after stutory filing requirements, this	filing.) Pursuant to 605	5.0207 (ed as ti
record specifies a delayed effective is filed.	e date, but not an effective time, at 1	2:01 a.m. on the earlier of: (b)	The 90th day afte	r the
ated October 27	<u>2020</u> .			
	' 1			
_ Jone 1	Signature of a member or authorized rep			