L20000344437

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

Office Use Only



600353011796

11/17/20--01003--004 **25.08

2020 NOV 17 PM 1: 45

12/21/20

COVER LETTER

TO: Registration Section **Division of Corporations**

SUBJECT:Name of Limited Liability Company							
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please return all corresp	ondence concerning this matter	to the following:					
	Brian Barnett						
		Name of Person					
	TB FINANCIAL INVEST	MENTS, LLC					
Firm/Company							
	PO BOX 236727						
		Address					
	Cocoa, FL 32923						
		City/State and Zip Code					
	bbarnett@a-ote.com						
	E-mail address: (to be used for future annual report noti	fication)				
For further information of	concerning this matter, please c	all:					
Brian Barnett		321 704-0387					
Name of Person		at ()	e Telephone Number				
Enclosed is a check for t	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 (additional copy is enclosed)				

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

TB FINANCIAL INVESTMENTS, LLC

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our reco Liability Company)	ords.)
he Articles of Organization for this Limited Liability Company	were filed on 10/29/2020	and assigned
Torida document number L20000344437		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "Li	LC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		26
Principal office address MUST BE A STREET ADDRESS)		F1L 2020 NOV 1.7
		LE 7 F
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX1		
		O!
. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	iddress on our records, <u>ent</u> e	er the name of the new registo
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	ress
		FloridaZip Code
	City	гар Соас
ew 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.

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>	Name	Address	Type of Action
AMBR	Todd McDowell	PO BOX 236727	■Add
		Cocoa, FL 32923	□Remove
			☐ Change
			□ Add
			□Remove
			2020 mnge F / Add E D Remove \$5
			□ Change
			□Add
			□Remove
			□ Change
 -			□ Add
			□Remove
			☐ Change
			
			□Remove
			□ Chann

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(If an effective 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 605.0207 (3)(b) _ (optional) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated November 11

Signature of a member or authorized representative of a member

Typed or printed name of signee