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Fax Number : (850)617-6383

From:

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Account Number : I20010000062 : (323)962-8600 Phone Fax Number : (323)962-3889

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VALDES & RODRIGUEZ LLC

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## COVER LETTER

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orms 1122915	VALDES &	& RODRIGUEZ LLC	•	
SUBJECT:		Name of Line	ited Liability Company	ndameta dukuma — oda sahiringalikhindi a 1811
The applement	1 Artinlan of	Amendment and fee(s) are sub	mitted for filing	
			• •	,
i'lease return	rail correspo	ndence concerning this matter	to the following:	
		Cheyenne Moseley	•	·
		والموافقة	Name of Person	,
		Legalzoom.com, Inc.	·	
			Firm:Company	
		101 N Brand Blvd 11th Fl	·	
			Address	,
		Glendale, CA 91203		•
			City/State and Zip Code	
		rodriguez.james14@yahoo.		
For further in	afòrmation c	oncerning this matter, please c	to be used for tuture annual report no alt:	operication)
Cheyenne M	loselcy		800 773-0888	
<del></del>	Name o	f Person .	Area Code Days	ime Telephone Number
				•
Enclosed is a	check for th	ne following amount:		
□ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55,00 Filing Fee & Certified Cropy (additional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		ING ADDRESS:	STREET/COU Registration Sec	RIER ADDRESS:
	Divisio	m of Corporations ox 6327	Division of Corp Clitton Building	orations ·
		ox 6327 assee, F1, 32314	2661 Executive Tallahassee, FL	Center Circle

To: 18506176383

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VALDES & RODRIGUEZ LLC	
(Name of the Limited Liability Company as it now ag (A Florida Limited Liability Compa	pears on our records.)
The Articles of Organization for this Limited Liability Company were filed or lorida document number 1.2 1060009267	12/30/2020 and assigned
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability compan	y here:
Toplites Military Solutions LLC	·
he new name must be distinguishable and contain the words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
nter new mailing address, if applicable:	. (<)
Mailing address MAY BE A POST OFFICE BOX)	
	23
- Line of the state of the stat	1
. If amending the registered agent and/or registered office address	s on our records, enter the name of the n
egistered agent and/or the new registered office address here:	
	<i>∞</i>
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
Ente	r Florida street <b>a</b> ddress
·	, Florida
City	Zip Code
ew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agree to act in topovisions of all statutes relative to the proper and complete performanc accept the obligations of my position as registered agent as provided for being filed to merely reflect a change in the registered office address, I have the change in the contents.	we of my duties, and I am familiar with and in Chapter 605, F.S. Or, if this document is wreby confirm that the limited liability

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

AMBR = Authorized Member

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added or removed from our records:

<u>Title</u>	Name	Address	Type of Action
**************************************			
			☐ Remove
			. ☐ Change
**************************************			
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<u>le:</u> [[	e date, if other than the date of filing:  tive date is listed, the date most be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at a effective date on the Department of State's records.
	rd specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier $0$ th day after the record is filed.
ر س امد	anuary 28, 2021
	Signature of a member or authorized representative of a member
	Signature of a digital of addition of decisional of a formation

Page 3 of 3

Filing Fee: \$25.00