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CAPITAL CONNECTION, INC.	
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222	
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Trim Fx Tampa Bay LLC	
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# **COVER LETTER**

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		Address	
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### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRIM FX TAMPA BAY 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 February 5, 2021 and assigned Florida document number <u>L21000063340</u> 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 "LLC." Enternew 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.

If Changing Registered Agent, Signature of New Registered Agent

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 Title Name Address Type of Action 5403 Drinkard Drive Samuel Llorca **AMBR** DAdd New Port Richey, FL 34653 **■**Remove □ Remove \_\_\_\_\_ □Change \_\_\_\_ □Remove □Change \_\_\_\_\_\_ □Remove \_\_\_\_\_\_ Change  $\square$ Add

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