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(Re	equestor's Name)	
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DA)	dress)	
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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:		TAL PROPERTIES LLC	
SUBJECT:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		ASPEN L. WILLIAMS	
	· - · · · ·	Name of Person	2
	AYC	E RENTAL PROPERTIES LLC	
		Firm/Company	
		2523 28TH S. STREET	
		Address	
	ST	. PETERSBURG FL 33712	
		City/State and Zip Code	
		tavariss7@icloud.com	
	E-mail address: (to be used for future annual report no	otification)
For further information of	concerning this matter, please c	ali:	
	ASPEN L. WILLIAMS	850	843-5867
Name o	of Person	at () Area Code Dayti	me 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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		Street Address: Registration S	ection
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of Co	
		The Centre of	<u>-</u>
			oe Street, Suite 810
		Tallahassee, F	L 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AYCE RENTAL PROPERTIES LLC

(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Clability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on03/15/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
AYCE CONSULTING LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	e 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:	Aspen L. Williams	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	427 Puckett Rd. Apt G31	
	Perry, FL. 32348	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the n</u>	ame of the new registere
		22
New Registered Office Address:	Enter Florida street address	22 OCT 1
	, Florida	(2) Zip C&de
New Registered Agent's Signature, if changing Registered Agent:	•	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I a provided for in Chapter 605, F.S. (agr <u>ee t</u> o comply with the m familiar with and Or, if this document is

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□ Add
			□Remove
			□Change
		 -	□Add
			□Remove
			□Change
			□ Add
			🗖 Remove

. If ameno	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effect Note: If	e date, if other than the date of filing:
the record s ford is filed	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
Dated	OCTOBER 12 2022
	Signature of a prember of authorized representative of a member
	ASPEN L. WILLIAMS
	Typed or printed name of signee