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I ALBRITTON

COVER LETTER

SUBJECT: T&J Eve Na	ame of Limited Lability Company
The enclosed Articles of Amendment and fee((s) are submitted for filing.
Please return all correspondence concerning the	his matter to the following:
J	Name of Person
	Everything Printing, LLC Firm/Company
<u> 271 S.</u>	E. Svaddock St. Address
Bor + 5-	City/State and Zip Code
<u>Bladpo</u> E-mai	l address: (to be used for future annual report notification)
For further information concerning this matter	r, please call:
Janice Strong Name of Person	at (561) 240-93577 Area Code Daytime Telephone Number
Enclosed is a check for the following amount: El \$25.00 Filing Fee	Fee & S55,00 Filing Fee & S60,00 Filing Fee.
Mailing Address: Registration Section	Street Address: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

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



2021 OCT 22 14 8: 04

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 12, 2021

JANICE STRONG 271 SE DRADDOCK ST PORT ST. LUCIE, FL 34952

SUBJECT: T&J EVERYTHING PRINTING, LLC

Ref. Number: L21000130646

We have received your document for T&J EVERYTHING PRINTING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

There's a signature in the registered agent section of the form, please verify whether or not you're changing this information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist III

Letter Number: 721A00024832

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The D Everthin	18 Tripping LLC	
(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L21000/30646}{L}$. This amendment is submitted to amend the following:	were filed on <u>3-/9-2/</u>	and assigned.
A. If amending name, enter the new name of the limited liab	pility company here:	F. 9. 5.7
Bland Pink 110		<u>~</u>
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2271 S.E. Beadock	S' X .
(Principal office address MUST BE A STREET ADDRESS)	2271 S.E. Bendrock	34952
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the n	ame of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	···
	. Florida	
	Citv	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 to 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		□Change	
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ootiva	e date, if other than the date of filing: (optional)
reffect te: If	edate, if other than the date of filing:
recoi he 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 0th day after the record is filed.
ed	September 26, 2001.
	Signature of a member or authorized representative of a member
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Page 3 of 3

Filing Fee: \$25.00