## 121000138618

| (Re                     | questor's Name)    |             |
|-------------------------|--------------------|-------------|
| (Ad                     | dress)             |             |
| (Ad                     | dress)             |             |
| (Cit                    | ry/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | siness Entity Nan  | ne)         |
| (Do                     | cument Number)     |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |
|                         |                    |             |

Office Use Only



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2021 JUL 14 PH 1: 33
SECRETARY OF SINIE
TALL WHESSEE SINIE

## **COVER LETTER**

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

| My Baby Fence Ta                          | ımpa Bay LLC  |   |
|---|---|---|
| Name of Limi                              | ted Liability Company   |   |
| Amendment and fee(s) are sub              | mitted for filing.  |   |
| ndence concerning this matter             | to the following:   |   |
| Christopher Dieas                         |   |   |
|   | Name of Person  |   |
|   | Firm/Company  |   |
| 4943 Pennsbury Dr                         |   |   |
|   | Address   |   |
| Tampa, FL 33624                           |   |   |
| ·   | City/State and Zip Code   |   |
| <del>-</del> -                            | to be used for fiture annual report not   | itication)  |
|   |   | ,   |
|   | 813 997-6328  |   |
| f Person                                  | Area Code Daytin  | ne Telephone Number   |
| ne following amount:                      |   |   |
| S30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)   | ☐ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed)   |
|   | <u>Street Address:</u><br>Registration Se   | ection  |
| Corporations                              | Division of Co  | rporations  |
|   | Name of Limi  Amendment and fee(s) are substantial address: (  Christopher Dieas  4943 Pennsbury Dr  Tampa, FL 33624  chrisdieas@gmail.com  E-mail address: (  oncerning this matter, please can  f Person  the following amount:  \$30.00 Filing Fee & | Firm/Company  4943 Pennsbury Dr  Address  Tampa. FL 33624  City/State and Zip Code chrisdieas@gmail.com  E-mail address: (to be used for future annual report not oncerning this matter, please call:  at ( |

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

| (Name of the Limited Liability Compar<br>(A Florida Limited L   | ny as it now appears on our reciability Company) | ords.)  | ,                  |
|---|--|---|--------------------|
| he Articles of Organization for this Limited Liability Company orida document number L21000138618               | were filed on                                    |   | and assigned       |
| his amendment is submitted to amend the following:  |  |   |                    |
| . If amending name, enter the new name of the limited liabi   | lity company here:                               |   |                    |
| ne new name must be distinguishable and contain the words "Limited Liabili                                      | ty Company," the designation "                   | LLC" or the abb   | reviation "L.L.C." |
| nter new principal offices address, if applicable:  |  | 지<br>전<br>3 등 8 등   | 2021               |
| Principal office address MUST BE A STREET ADDRESS)  |  | RE:   |                    |
|   |  | 出記  | -                  |
|   |  | 388<br>40 A   | P                  |
| nter new mailing address, if applicable:  |  | $\hat{\mathbf{L}}_{\mathbf{L}}$ $\hat{\mathbf{v}}_{\mathbf{L}}$ |                    |
| Mailing address MAY BE A POST OFFICE BOX)   |  |   | ယ္ဆ                |
| <u>-</u>  |  |   | :                  |
| If amending the registered agent and/or registered office a cent and/or the new registered office address here: | ddress on our records, <u>en</u>                 | ter the name  | of the new reg     |
| Name of New Registered Agent:   |  |   |                    |
| New Registered Office Address:  |  |   |                    |
|   | Enter Florida street ad                          | dress   |                    |
|   | City ,   | Florida   | Zip Code           |
|   |  |   |                    |

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

| <u>Title</u> | <u>Name</u>       | Address                                | Type of Action                           |
|--------------|-------------------|--|--|
| ₩£           | Christopher Dieas | 4943 Pennsbury Dr                      |  |
| O            |                   | Tampa, FL 33624                        |  |
|              |                   |  |  |
|              |                   |  | ,<br>□Add                                |
|              |                   | ···                                    | □Remove                                  |
|              |                   |  | □Change                                  |
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|              |                   |  | Remove                                   |
|              |                   |  | 775 THE SS □Add                          |
|              |                   |  | □Remove                                  |
|              |                   |  | □Change                                  |
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| member.  |  |                              |               | ·· -···       |                 |               |              |              |              |
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| ective date, if other  | than the date o                            | of filing:                   | 3/24/2021     |               |                 | (optio        | nal)         |              |              |
| n effective date is listed, the term of the date inserted current's effective date | he date must be spe<br>I in this block doe | eific and can<br>es not meet | the applicab  |               | or more than 90 | days after f  | iling.) Pur  |              |              |
| ecord specifies a delayers filed.  | ed effective date,                         | but not an                   | effective tim | e, at 12:01 a | .m. on the earl | ier of: (b)   | The 90       | th day a     | ifter the    |
| ted_JINE   | 25   |                              | 3091          | _ ·           |                 |               |              |              |              |
| / /  |  | _ /                          |               |               |                 |               |              |              |              |

Typed or printed name of signee