

W21000 152893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

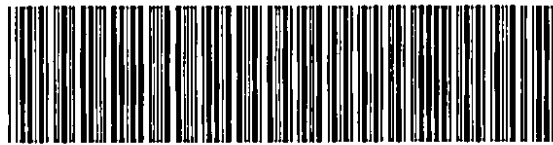
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100367658981

08 14/21--1101--004 **25.00

2011-06-01 14:25

08/31/21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
AUG 30 PM 2:48

July 14, 2021

JEFFREY WILLIAM MORRISON
1408 88TH CT. NW
BRADENTON, FL 34209

SUBJECT: TRES BIEJOS AMIGOS LLC
Ref. Number: L21000152893

We have received your document for TRES BIEJOS AMIGOS 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Alecia Rivers
Regulatory Specialist II

Letter Number: 721A00016119

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Tres Biejos Amigos LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffrey William Morrison

Name of Person

Firm/Company

1408 88th CT NW

Address

Bradenton, FL 34209

City/State and Zip Code

dr.morrison@verizon.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffrey William Morrison

941

448-5105

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

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

Street Address:

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

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

Tres Viejos Amigos 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 April 1, 2021 and assigned
Florida document number L21000152893.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Tres Viejos Amigos LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1408 88th CT NW

Bradenton, FL 34209

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1408 88th CT NW

Bradenton, FL 34209

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:

Jeffrey William Morrison

New Registered Office Address:

1408 88th CT NW

Enter Florida street address

Bradenton

Florida 34209

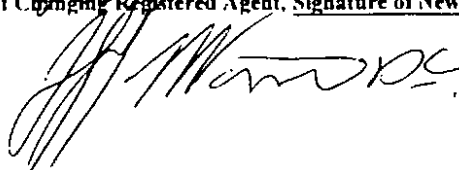
City

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 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.

Jeffrey W. Morrison DC
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>	<u>Address</u>	<u>Type of Action</u>
MGR	Timothy P Lehman	9129 16th AVE CIRCLE NW	<input type="checkbox"/> Add
		Bradenton, FL 34209	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jeffrey William Morrison	1408 88th CT NW	<input checked="" type="checkbox"/> Add
		Bradenton, FL 34209	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Scott W Morrison	312 70th St NW	<input checked="" type="checkbox"/> Add
		Bradenton, FL 34209	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Frank J Soto	10025 Cherry Hills Ave. Circle	<input checked="" type="checkbox"/> Add
		Bradenton, FL 34202	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

If the record 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 record is filed.

Timothy P Lehman

Typed or printed name of signee

Filing Fee: \$25.00