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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L

Account Number : 120040000167

Phone

: (305)377-0809

Fax Number

: (305)377-0781

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* @ poyalaw com Corporate

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TOCA, LLC

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Certificate of Status	11
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Estimated Charge	\$30.00

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOCA, LLC		
( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabilit	y Company were filed on 05/18/2021	and assigned
This amendment is submitted to amend the following	3:	
A. If amending name, enter the new name of the	limited liability company here:	
TSCS, 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 AL		<b>50</b>
		<u> </u>
Enter new mailing address, if applicable:	·	FIL MAY 24 NEJAGS NHASS
(Mailing address MAY BE A POST OFFICE BO)	0	
Indining dualess MATERIA TO SECTION OF THE PARTY OF THE P		77 J <b>X</b>
B. If amending the registered agent and/or r	registered office address on our records,	enter the mame of the ne
registered agent and/or the new registered office	address here:	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flor	ida
<del>-</del>	, Flor	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.

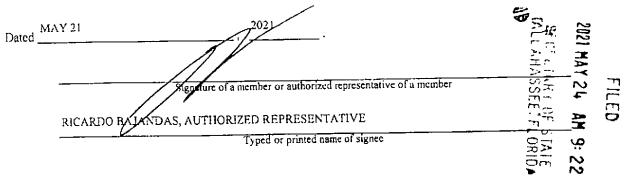
If Changing Registered Agent, Signature of New Registered Agent

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			☐ Change
			D Add
			☐ Remove
			☐ Change
			Add
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ctive date, if other than the da	C. C. L	(ontional)

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.



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