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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

	les & Consulting Services LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Mark P Tucker			
	·	Name of Person	· · · · · · · · · · · · · · · · · · ·	
	Tucker Sales & Consulting	Services LLC		
		Firm/Company		
	17118 Wrigley Circle			
		Address		
	Fort Myers, Fl.orida 3390	3		
	±	City/State and Zip Code		~
	Mark.P.Tucker@sbcglobal.			85 PS 120
	E-mail address: (to be used for future annual report not	(heation)	
For further information	concerning this matter, please c	all:		2021 AUS 30 SEALL/11
		91 ()		
Name	of Person	at () Area Code Daytin	ne Telephone Number	- 3
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 State Certified Copy (additional copy is enc	

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

Tucker Sales & Consulting Services 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 June 4, 2021 and assigned Florida document number L21000260890 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address CnvNew 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Mark P Tucker	17118 Wrigley Circle	= Add
		Fort Myers, Florida 33908	□Remove
			□Change
AMBR	Susan I. Tucker	17118 Wrigley Circle	□Add
		Fort Myers, Florida 33908	□Remove
			Change
			Remove
			_
			□Remove ω
](hange
			□ Add
			□Remove
			□ Change

	
	
	
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Affective date, if other than the date of filing:	rsuant to 605,0207 (I I not be listed as th
Reduction 3 effective date on the Department of Education	r,
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90 d is filed.	Oth day after the
August 27 2021	
Dated August 27 . 2021	
May () ()	
Suprature of a member or authorized representative of a member	

Filing Fee: \$25.00