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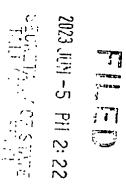
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
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Y. SCOTT JUL 2 9 2023

COVER LETTER

TO: Registration Son Division of Con			
SUBJECT: TWO S	Kas Business Man	agement LC	
	Name of Lim	Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Claudia	Balch Name of Person	, s.
	Y OWT	al Bulincus Manageme Firm/Company	
	<u>4934 w s</u>	an Rafacl Street Address	5
	Tamp	City/State and Zip Code	PH 2: 22
	Claudia E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Name o	Balch of Person	at (<u>\$13</u>) <u>362 - 5</u> Area Code Daytim	be Telephone Number
Enclosed is a check for t	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 Addre	Section	Street Address: Registration Se	
Division of C P.O. Box 63:	-	Division of Cor The Centre of T	•
Tallahassee.	· ·	· ·	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Two Stas Business Mana	was it now appears on our	records.)
(A Florida Limited Li	ability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on <u>67 / 0</u>	1 12021 and assigned
Florida document number <u>L21000302(e14</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Two stas Property Manager The new name must be distinguishable and contain the words "Limited Likelike	nent uc y Company," the designation	n "LLC" or the abbeeviation "L.L.C."
Enter new principal offices address, if applicable:		28 2 T
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
		SEFF. SI
Enter new mailing address, if applicable:		77A 2
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records,	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	oddress
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my dut rovided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is

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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Celia Balch	4934 w Jan Parael Street, Tampa.	PL XAdd
			□Remove
			□Change
			□Add
			□Remove
		<u> </u>	□Change
			☐ Add
		LAHAS SE, FI	Remove
			Change
			🗆 Add
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			□Add
			□Remove
			☐Change

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	AS R M
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing of	(optional)
lote: If the date inserted in this block does not meet the applicable statutory fi	iling requirements, this date will not be listed
ocument's effective date on the Department of State's records.	
	of the Canada The Contract Country
record specifies a delayed effective date, but not an effective time, at 12:01 a.r	m. on the eartier of: (b) The 90th day after the
ris thea.	
FISTREG.	
_i	
Pated June 2nd . 2023 .	
Dated June 2 ^{not} . 2023	tive of a member

THE P. CO. C.