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COVER LETTER

TO: **Registration Section Division of Corporations**

SUBJECT:			
-	Name of Limit	ed Liability Company	
The enclosed Articles of a	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspon	ndence concerning this matter to	o the following:	
		Tierra NIcole Young	
		Name of Person	
	TNT	UNLIMITED GROUP LLC	
		Firm/Company	
	14333 Be	ach Blvd Suite 33-258	
		Address	
	Jac	eksonville, FL 32250	
		City/State and Zip Code	
		errayoung69@gmail.com o be used for future annual report notif	-
			neation)
For further information co	oncerning this matter, please ca	II:	
Tierra Ni	cole Young	904 418-0733 at ()	
Name of	Person	Area Code Daytime	e Telephone Number
Enclosed is a check for th	e following amount:		
S25.00 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

TNT UNLIMITED GROUP	LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability C	ow appears on our record company)	<u>is.</u>)
The Articles of Organization for this Limited Liability Company were file L21000314771 L21000314771	ed on07i(09/2	021 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability con	npany here:	
The new name must be distinguishable and contain the words "Limited Liability Compa	any," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		021
		= 8 T
		-
Enter new mailing address, if applicable:		SSC 👱 ITT
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
		¥2
	·	<u> </u>
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	on our records, <u>ente</u>	r the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	288
	r	lorida
Сиу		Zip Code
No. 15 Sec. 2. h. 1122 Charles of Managing Designation Assessed		

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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Michaelle Christine Johns	on 14333 Beach BIVE Suite 33-258 Jacksoville FL 322	Z (Add
		Jacksoville FL 322	SO □Remove
			□Change
			□Add
			□Remove
			©Change
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ecí	tive date, if other than the date of filing:
1 ef te:	Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020 and the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
cun	nent's effective date on the Department of State's records.
	rd 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 iled.
	08/27 2021
	$\frac{08/27}{2} \cdot \frac{2021}{2}$
	To soon of the
ited	Signature of a member or authorized representative of a member