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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
Amend



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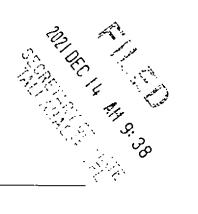
COVER LETTER

TO: Registration S Division of Co			•		
TriCore S	torage Fund MGT, LLC		·		
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	emitted for filing			
	ondence concerning this matter	·			
	JOHN SCOTT DAIHN				
		Name of Person			
	TriCore Storage Fund MG	T.11C			
		Firm/Company			
	999 Douglas Avenue Suite	3318			
	_	Address			2
	Altamonte Springs, FL 327	714		38	2021 DEC 14
	1 2	City State and Zip Code		三国	DEC
	scott/a,tricoreig.com	, ,			=
	E-mail address. (to be used for future annual report notific	ation)	A.	7
For further information	concerning this matter, please ca	all:			<u>ب</u>
John Scott Dahin		407 388-4418] <u></u> ;	<u>ვ</u>
Name	of Person	Area Code Daytime	elephone 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 For Certificate of \$ Certified Copy (additional copy is	tatus &	
Mailing Addre		Street Address:			
Registration Division of C		Registration Secti Division of Corpo			
P.O. Box 633		The Centre of Tal			

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Fallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



TriCore Storage Fund MGT, 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 Comp	any were filed on July 28, 2021	and assigned
Florida document number 1.21000341326		
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 "I imited (lability Company." the designation "LLC" o	r the abbreviation "L.L.C."
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 BON)		
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, <u>enter the</u>	e name of the new registered
New Registered Office Address:		
	Luter Florida street address	
	Florid	da
New Registered Agent's Signature, if changing Registered Age		zip Cink
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compleaccept the obligations of my position as registered agent a being filed to merely reflect a change in the registered off company has been notified in writing of this change.	igree to act in this capacity. I furth etc performance of my duties, and i as provided for in Chapter 605, F.S	l am familiar with and S. Or, if this document is
li c	hanging Registered Agent. Signature of No	ew 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
AMBR	RealProTec, LLC	999 Douglas Avenue Suite 3318	\ \
		Altamonte Springs, F1, 32714	□Remove
			□("hange
MGR	John Scott Dahin	999 Douglas Avenue Suite 3318	□Add
		Altamonte Springs, FL 32712	≡ Remove
			ClChange
			□Add
			□Remove
			□Change
			□Add
			©Remove
			□Change
			
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Effective date, if other than the d	late of filing:		(optional)	
If an effective date is fisted, the date must be Note: If the date inserted in this bloc	be specific and cannot be prior	to date of filing or more that	n 90 days after filing,) Pursuant to 6	อ05.0207 (. ระยาสาคร.ศ
document's effective date on the Dep			orthenis, this date will not be t	isica as i
e record specifies a delayed effective (date, but not an effective ti	me, at 12:01 a.m. on the	earlier of: (h) The 90th day a	fter the
rd is filed.				
			1 _	
Dated	2021	/ ## >		
Dated December 10	. 2021			

Filing Fee: \$25.00

Typed or printed name of signee