## 121000390941

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Y GULKER NOV 0 8 2021



October 5, 2021

TIME AND TONIC HOLDINGS, LLC 475 BRICKELL AVE APT 4511 MIAMI, FL 33131

SUBJECT: TIME AND TONIC HOLDINGS, LLC

Ref. Number: L21000390941

We have received your document for TIME AND TONIC HOLDINGS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 321A00024171

Yasemin Y Sulker Regulatory Specialist III

## . COVER LETTER

TO:

**Registration Section** 

Division of Corporations				
TIME AN	D TONIC HOLDINGS, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return an corresp	ondence concerning this matter	to the tonowing.		
	Carl Telias			
	Name of Person			
	Telias & Company, Inc.			
		Firm/Company	<del></del>	
	2799 NW 2nd Avenue - Suite 107			
		Address		
	Boca Raton, Florida 3343	l		
		City/State and Zip Code		
	ctelias@amlbsa.com	to be used for future annual report not	ification	
For further information	concerning this matter, please c			
	concerning and matter, preserv			
Carl Telias		561 901-5657 at ()		
Name	of Person	Area Code Daytin	e Telephone Number	
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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of T 2415 N. Monre	rporations	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	, Florida Zip Code
Ente	er Florida street address
New Registered Office Address:	
Name of New Registered Agent:	
	38 38
If amending the registered agent and/or registered office address on e ent and/or the new registered office address here:	our records, enter the name of the new rogis
	inc 🔀 🛂
	(F)
failing address MAY BE A POST OFFICE BOX)	
ter new mailing address, if applicable:	221
	F~3
incipal office address MUST BE A STREET ADDRESS)	
ter new principal offices address, if applicable:	
	the designation (222) of the deservation (222)
new name must be distinguishable and contain the words "Limited Liability Company."	"the designation "LLC" or the abbreviation "L.L.C."
If amending name, enter the new name of the limited liability compa	ny here:
is amendment is submitted to amend the following:	
orida document number L21000390941	
	on and assigned
e Articles of Organization for this Limited Liability Company were filed or	on 08/30/2021 and assigned
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	appears on our records.) pany)
TIME AND TONIC HOLDINGS, LLC	opposite on our reports

## 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 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	HERNANDEZ, JUAN P	46 NW 36TH ST	□Add
		MIAMI, FL 33127	□Remove
			DAdd
			□Remove
			□ Change
			Remove
			Change
			DAdd
			□Remove
			Change
			□Remove
			Change
			□Add
			□Remove
			□ Change

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Effective date, if other than the dat	10/22/2021	(optional)	
Effective date, if other than the date of the date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depart	specific and cannot be prior to date of does not meet the applicable state	filing or more than 90 days after filing.) Put	suant to 605.0207 (3 not be listed as th
e record specifies a delayed effective da rd is filed.	te, but not an effective time, at 12	::01 a.m. on the earlier of: (b) The 90	th day after the
Dated OCTOBER 22	. 2021		
///		>	
Sig	nature of a member or authorized repr	resentative of a member	
JUAN P. HERNANDEZ			
	Typed or printed name of	f signee	<del></del>

Filing Fee: \$25.00