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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TK9 MF6, LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:	
Richard L. Hill Name of Person	
TK9 MF6, LLC Firm/Company	
2026 O'connel AVE SW Address	
Palm Bay FL 32908 City/State and Zip Code E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call: Richard L. Hill at (321) 360-9672 Name of Person at (321) Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee Certified Copy (additional copy is enclosed) □ \$55.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compan (A Florida Limited I.					
The Articles of Organization for this Limited Liability Company	were filed on <u>UC</u> 1	r・ 8 , みのみ / and assigned			
Florida document number <u>L 2 000 439908</u> .					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil	lity company here:				
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the desig	nation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)	 ,	5 29			
		TAC 21			
		- O			
Enter new mailing address, if applicable:		- 30 ···			
(Mailing address MAY BE A POST OFFICE BOX)		70			
		7			
		TE 5			
B. If amending the registered agent and/or registered office as agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our reco	rds, <u>enter the name of the new register</u>			
New Registered Office Address:	Enter Florida street address				
	Enter Florida street address , Florida				
	City	Zip Code			
New Registered Agent's Signature, if changing Registered Agent:					

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
CFO_	Richard L. Hill	2026 O Connel Ave SW	□Add
		2026 O Connel Ave SW Palm Bay FC 32908	Remove
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