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## **COVER LETTER**

TO:

Registration Section

Div	ision of Cor	porations		
LITTER FEE ZVIV.	TennPenn I	Mining LLC		
SUBJECT:		Name of Lin	ited Liability Company	<del></del>
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		William Spargur		
			Name of Person	tunj.
		Spargur Tax & Accounting	, PA	
			Firm/Company	
		8891 Brighton Lane, Ste 1	)4	် <u>ထ</u>
		-	Address	——: မြောင်း (၁) လ
		Bonita Springs, FL 34135		PH 3: 02
			City/State and Zip Code	
		william@spargurtax.com		
			to be used for future annual report notification)	<del>- 1</del>
For further in	iformation c	oncerning this matter, please co	ıll:	
William Spar	rgur		239 777-3366 at ( )	
-	Name o	f Person	Area Code Daytime Telepho	one Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	iling 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)
Reg Div P.O	ling Addressistration Spision of Co. Box 632 lahassec, F	Section orporations 7	Street Address: Registration Section Division of Corporatio The Centre of Tallahas 2415 N. Monroe Street Tallahassee, FL 32303	ssee t, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TennPenn Mining LLC		
(Name of the Limited Liabilit (A Florida	y Company as it now appears on our records.) Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Co	ompany were filed on Jan 3, 2022	and assigned
Florida document number 1.22000008678	_·	·
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
TM Research LLC		
he new name must be distinguishable and contain the words "Limi	ted Liability 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 ADDR	ESS)	111
		(A)
Inter new mailing address, if applicable:		The premary
Mailing address MAY BE A POST OFFICE BOX)		<u>ن</u> <u>ب</u>
		- F 12
3. If amending the registered agent and/or registered gent and/or the new registered office address here:	office address on our records, enter the	e name of the new regist
Name of New Registered Agent:	<del></del>	
New Registered Office Address:		
	Enter Florida street address	
	Flori	
	City	Zip Code

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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
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			□Remove
			Change
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ective date, if other than the date of filing:		(optional)		
effective date is listed, the date must be specific and cannot be prior to	o date of filing or more than 90	days after filing.)	Pursuan	it to 605.02
e: If the date inserted in this block does not meet the applical ument's effective date on the Department of State's records.	ble statutory filing requiren	ients, this date	will not	be listed
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cord specifies a delayed effective date, but not an effective tin	ic, at 12:01 a.m. on the earl	ier of: (b) The	: 90th d	av after th
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II I N N N				
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Signature of a member or author	<del>. , – , , – ,</del>			

Filing Fee: \$25.00