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(R	equestor's Name)	
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PICK-UP	WAIT	MAIL
(B	Business Entity Nar	me)
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Certified Copies	Certificates	s of Status
Special Instructions to	o Filing Officer:	

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BLANE HARY OF STATE TALLAHASSEE, FLORIDA

2022 HAY -3 AH 7: 5

JUN 2 4 2022

S. PRATHER

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJ	ECT:TON K LLC	
	Name of Limited Liability Company	
The er	closed Articles of Amendment and fee(s) are submitted for filing.	
Plcase	return all correspondence concerning this matter to the following:	
	Victoria Scott Name of Person	
	Name of Person	
	Scotis Holdings Firm/Company	
	Firm/Company	
	1982 7th ave	
	1982 7th ave Address	
	Dejand FL 32724 City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For fu	ther information concerning this matter, please call:	
i Oi Tu	the mornation concerning this matter, please can.	
	Victoria Scott at (707) 205 - 5723  Name of Person Area Code Daytime Telephone Number	
	Name of Person Area Code Daytime Telephone Number	
Enclos	ed is a check for the following amount:	
<b>∑</b> (\$2	5.00 Filing Fee \$\Bigcup \$30.00 Filing Fee \& \Bigcup \$55.00 Filing Fee \& \Bigcup \$60.00 Filing Fee, Certificate of Status \$\Bigcup \$ Certificate of Status \& Certificate Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status \& Certificate Opy (additional copy is enclosed)	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Or	
Ton K LL	$\sim$	FIL MY -3 HASSE
TOTIKEL	- C	<u> </u>
(Name of the Limited Liabili	ty Company as it now appears on our	records.
(71.101.12	a company)	- 1: - 1: - 1:
(Name of the Limited Liability Companies of Organization for this Limited Liability Companies 1,22,00012,635	Company were filed on <u>Junua</u>	1405,2022 and assigned
Florida document number <u>L22000012639</u>	<u>5</u> .	•
wis amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lirr	nited I inhility Company "the designation	"LLC" or the abbreviation "LLC"
The new hadre make be alwing anxietie that contain the words. The	med manney company, the designation	Time of the things that the same.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	•	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records,	enter the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
Name Designation of OCC and Address		
New Registered Office Address:	Enter Florida street	uddress
		, Florida
	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action** Title <u>Name</u> **Address** CEO/ Victoria Scott 1982 7th Ave deland FL Add AMBR \_\_\_\_\_ □Remove \_\_\_\_\_ Change □Add \_\_\_\_\_ □Change \_\_\_\_\_\_ □ Add \_\_\_\_\_ Remove ☐ Change

Effective date, if other than the date of filing:  (If an effective 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 0207 (3 Motes: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  The record 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 cord is filed.  Dated  April 20th  Significate of a matches or authorized representative of a member  Typod or protect name of signee:	. If amending any other information, enter change(s) here: (Attach additional sheets, if necess	ury.)
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