## h22000060369

(Requ	uestor's Name)	
lbbA)	ress)	
(Addi	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	
J. HO	RNE	
APR 1	9 2022	

Office Use Only



600382626346

04/04/22--01011--003 \*\*25.00

2027-APR -4 AM:11: 23
SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT:	TLV Ser Name of Limi	rvices and Advisor	5,44C
The enclosed Articles of z	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	10275 Ola 0Tack	Jesus A. Jere  Name of Person  Services and Advi  Firm/Company  Laint Augustine  Address  Sonville, FL 32.  City/State and Zip Code  drojeres and Advi  to boused for future annual report notifice	isors,40 Rd. Apt 801
For further information co	oncerning this matter, please of		attony
Name of	A. Terez	at ( <u>904</u> ) <u>962-</u> Area Code Daytime	1456 Telephone Number
Enclosed is a check for th	e 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 Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TLV Service. (Name of the Limited Liability Compa		
(A Florida Limited	Liability Company)	,
The Articles of Organization for this Limited Liability Company Florida document number <u>L2Z000060369</u> .	were filed on	2/04/2022 and assigned
This amendment is submitted to amend the following:		<b>202</b> Se Tal
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	Z APR - CRETA
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the abbrecation "L.I.C."
Enter new principal offices address, if applicable:		[
(Principal office address MUST BE A STREET ADDRESS)		<b>\(\cdot\)</b>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u>//A</u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>e</u>	nter the name of the new registere
Name of New Registered Agent:	N/.	A
New Registered Office Address:	N/P Enter Florida street a	<u>A</u> 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 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
MGR	Bertha Hornardez Topia	102750ld Saint Augustine Rd. Apt Tacksorville, FL 32257	4801 Add
			□Remove
			Change
			🗀 Add
			□Remove
			Change
	<del></del>		□Add
	<del></del>		□Remove
			□Change
			<u>∐</u> Remove
			□Change
<del></del>			□Add
			□Remove
			[]Change
the Contract of the			□Add
			ПРеточе
			Псь

77/77
<u> </u>
, ,
e date, if other than the date of filing: 03/15/2022 (optional) tive 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 605.0
ive 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 605.0
the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed it's effective date on the Department of State's records.
t a checure take on the Department of Otale 2 records.
specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t I.
15th March 2022
15th of March 2022
Signature of a member or authorized representative of a member
and the second s
Typed or printed name of signee
ı