

122 0000 92344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

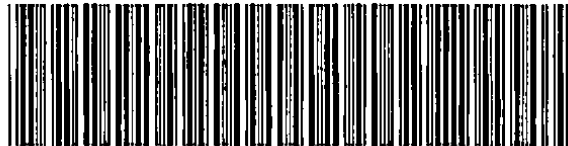
(Business Entity Name)

(Document Number)

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04/18/22--01038--025 **25.00

FILED
2022 APR 18 AM 10:50
TALLAHASSEE FL

6 CF 12/12/22

Registration Section
Division of Corporations

SUBJECT: T1 Legacy, LLC
Name of Limited Liability Company

Enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Andre Thompson
Name of Person

T1 Legacy FL, LLC
Firm/Company

9314 Forest Hill Blvd. Suite 671
Address

Wellington, FL 33411
City/State and Zip Code

anthomp12@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andre Thompson at (561) 702 - 2374
Name of Person Area Code Daytime 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)
☐ \$60.00 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**

FILED

T1 Legacy, LLC

(Name of the Limited Liability Company as it now appears on our records,
(A Florida Limited Liability Company))

2022 APR 18 AM 10:50

Articles of Organization for this Limited Liability Company were filed on 02.11.22 and assigned
file number L22000092344.

amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

T1 Legacy FL, LLC

New name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

9314 Forest Hill Blvd. Suite 671

Principal office address MUST BE A STREET ADDRESS

Wellington, FL 33411

Enter new mailing address, if applicable:

9314 Forest Hill Blvd. Suite 671

Mailing address MAY BE A POST OFFICE BOX

Wellington, FL 33411

If amending the registered agent and/or registered 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:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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

R = Manager
3R = Authorized Member

3R = Authorized Member

[illegible]

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Effective date, if other than the date of filing: _____ (optional)

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)(b)

Note: 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.

If 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 document is filed.

Dated March 31, 2022 . _____

Andre Thompson

Signature of a member or authorized representative of a member

Andre Thompson

Typed or printed name of signee