## 12000297387

(Requestor's Na	me)
(Address)	
(Address)	
(City/State/Zip/F	hone #)
PICK-UP WAI	MAIL
(Business Entity	(Name)
(Document Nun	nber)
Certified Copies Certifi	cates of Status
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## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT:	Lanise Grou	up IIc			
SUBJECT:		<u>'1</u>	d Liability Company		
The enclosed Artic	cles of Amendmen	nt and fee(s) are subm	itted for filing.		
Please return all co	orrespondence con	derning this matter to	the following:		
		Kelly Gibson	Name of Person		-
			Name of Person		
			Firm/Company		-
		Po Box 820	Address		
		Winter park F			022 OC
			City/State and Zip Code		125
For further inform	ation concerning t	his matter, please call	be used for future annual reports:	n nouncation)	2022 OCT 25 75110: 36
Kelly G			at ( 407-690-67		
1	Name of Person		Area Code L	Daytime Telephone Number	
Enclosed is a chec	k for the following	gamount:			
□ \$25.00 Filing		Filing Fee & ficate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	) Certified	te of Status &
Divisior P.O. Bo	tion Section of Corporation	ns	The Centre 2415 N. M		10

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Џanise (		່ ບ້າ
(Name of the Li	mited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited	Liability Company were filed on	July 1,2022 and assigned
florida document number <u>L220</u> 002973		
This amendment is submitted to amend the fo	ollowing:	
A. If amending name, enter the new name	of the limited liability company he	ere:
TRS Brokerage Group Llc		
The new name must be distinguishable and contain th	e words "Limited Liability Company." the d	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if app	licable:	
(Principal office address MUST BE A STR	EET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	Po Box 8 Winter I	320 Park fl 32790
B. If amending the registered agent and/o agent and/or the new registered office add	ν.·	ecords, <u>enter the name of the new regis</u> t
Name of New Registered Agent:	Registered Agents Inc	·
New Registered Office Address:	7901 4th Street N, Suit	e 300
	Enter Flor	ida street address
	St. Petersburg	Florida 33702
	City	Zip Code
New Registered Agent's Signature if changin	g Registered Agent:	
I hereby accept the appointment as registe provisions of all statutes relative to the pr		

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

<u>Title</u>	<u>Name</u>		Address	Type of Action
Owner	Kelly Gibs	on	5852 Sundown Cir Apt# 811	<b>⊠</b> Add
			Orlando Florida 32822	□Remove
			· · · · ·	□ Change
	Rasheem G	ibson	5852 Sundown Cir Apt# 811	□Add
			Orlando Florida 32822	<b>⊠</b> Remove
				□ Change
			<del></del>	□ Add
				□Remove
				□ Change
				□Add
				□Remove
				□Change
				□Add
				□Remove
			□ Change	
				□Add
				□Remove
				□Change

If amendir	ng any other info	rmation, enter change(s) here: (Attach additional sheets, if necessary:)
<del></del>		
	<u> </u>	
		<u> </u>
Effective d	late, if other than	the date of filing: July 4, 2022 (optional)
(It an effective Note: If the	e date is listed, the date date in the	must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(is block does not meet the applicable statutory filing requirements, this date will not be listed as the ne Department of State's records.
the record spectord is filed.	ecifies a delayed eff	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	10/20	2022
		Kuly Giboan
-		Signature of a member or authorized representative of a member
		Kelly Gibson
•		Typed or printed name of signee

Filing Fee: \$25.00