L22000368104

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COVER LETTER

TO: 'Registration S Division of Co			š
	r Motors LLC		•
SUBJECT: 4	Name of Lim	ited Liability Company	
	f Amendment and fee(s) are sub condence concerning this matter	-	
	Thierry Thomas		
		Name of Person	
	TT Blower Motors LLC		
		Firm/Company	
	7716 Thornlee Dr.		
		Address	
	Lake Worth, FL 33467		
		City/State and Zip Code	
	ttblowermotors@outlook.cc E-mail address: (om to be used for future annual report notific	eation)
For further information	concerning this matter, please c	all:	
Thien Name	of Person	at (<u>561</u>) <u>789</u> . Area Code Daytime	S& 70 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 Addre Registration		Street Address: Registration Sect	ion

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

TT Blower Motors LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on August 22, 2022 and assigned Florida document number L22000368104 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. 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

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.

City

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

Title	<u>Name</u>	Address	Type of Action
MGR	Maria Thomas	7716 Thornlee Dr, Lake Worth, FL 33467	
			≣Remove
			□Change
MGR Bri	Brittany Thomas	7716 Thornlee Dr. Lake Worth, FL 33467	□Add
			■Remove
			Change
			□Ādd
			□Remove
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Effective date, if other than the If an effective date is listed, the date mu Note: If the date inserted in this bidocument's effective date on the D	lock does not meet the applicable	(option: ate of filing or more than 90 days after fili statutory filing requirements, this days	al) ng.) Pursuant to 605.0207 tte will not be listed as
e record specifies a delayed effectived is filed.	/e date, but not an effective time,	at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Dated September 11	2022		
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	<i>A</i>		

Typed or printed name of signce