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200427896182

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COVER LETTER

TO: Registration So Division of Cor			
	VICES, LLC	•	
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Edwin A. Green, III, Es	quire	
		Name of Person	·
	Gilligan, Anderson, Phel-	an, Williams & Green, P.A.	
		Firm/Company	
	1531 SE 36th Avenue		
		Address	
	Ocala, FL 34471		
		City/State and Zip Code	
	tgreen@ocalalaw.com	to be used for future annual report	notification)
For further information c	oncerning this matter, please c	·	,
Edwin A. Green, III, E	squire	352 867-770	7
Name o	f Person	at () Area Code Day	rtime Telephone Number
Enclosed is a check for the	he 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 Addres Registration 9 Division of C	Section Torporations	Street Address Registration Division of C	Section Corporations
P.O. Box 632	.7	The Centre of	of Tallahassee

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TSC Services, LLC

(Name of the Limits	ed Liability Compa (A Florida Limited I	ny as it now appears on o Liability Company)	urrecords.); -3 £	<u>7 : 3</u> 0
The Articles of Organization for this Limited Li Florida document number			Ç_	
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the wa	ords "Limited Liabil	lity Company," the designa	tion "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applica		1812 SE 38th Avenu		
(Principal office address MUST BE A STREET ADDRESS)		Ocala, FL 34471		
		Ocala, FE 37471		
Enter now mailing address if applicable.				
Enter new mailing address, if applicable:	PAVI	1812 SE 38th Avenue		
(Mailing address MAY BE A POST OFFICE BOX)		Ocala, Fl. 34471		
B. If amending the registered agent and/or reagent and/or the new registered office addres Name of New Registered Agent:			s, <u>enter the name o</u>	f the new registered
New Registered Office Address:	1531 SE 36th	Avenue		
New Negistered Office Address.	Enter Florida street address			
	Ocala		, Florida3447	1
		City		Zip Code
New Registered Agent's Signature, if changing Rad hereby accept the appointment as registered provisions of all statutes relative to the properacept the obligations of my position as registle being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of this company has been notified.	l agent and agra or and complete tered agent as p egistered office	performance of my di provided for in Chapte	uties, and I am fam er 605, F.S. Or, if t	iliar with and his document is

, If attending 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	James P. Libby		□Add
			■ Remove
			Change
MGR	Kevin J. Libby	1812 SE 38th Avenue	= Add
		Ocala, FL 34471	_
			Change
MGR	Greggory Merideth	1117 Oxbow Road	■Add
		Wimauma, FL 33598	□Remove
			□Change
		_	
			□Remove
			□Change
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ffective date, if oth	er than the date of fi	iling:		(optional) i 90 days after tiling.) Pursuant	
				i 90 days after filing.) Pursuant rements, this date will not b	
	late on the Department				
record specifies a de f is filed.	layed effective date, but	not an effective time	e, at 12:01 a.m. on the	earlier of: (b) The 90th day	y after the
April 8		2024			
ated		2. 			
		\rightarrow \subset	-1		
-	Signature o	of a prember or authori:	zed representative of a me	ember	_

Typed or printed name of signee



April 30, 2024

EDWIN A. GREEN, III, ESQUIRE 1531 SE 36TH AVENUE OCALA, FL 34471

Ref. Number: 200427896182

We have received your document for and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 024A00009309

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