L22000438839

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300408355453

05/32/28--31028--006 **25.11

23 |8117 VIN

2023 MAY 22 AM 8: 513

COVER LETTER

TO:

Registration Section

Division of Cor	porations		
SUBJECT:	set Tone W Name of Lim	ith Twan LL ited Liability Company	C
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
·	_		
	Antwan V	Name of Person	
	Get Tone	With Twan LL Firm/Company	<u>C</u>
	16279 E Truf	Address	
	Loxahatchec	City/State and Zip Code Company Compa	 -
	gettonewitht E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c		
Antuca h	ashington f Person	at (561) 718 - Area Code Daytin	ne 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)	Section Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration So	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee, l	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	my as it now appears on our records.) Liability Company)	 _
The Articles of Organization for this Limited Liability Company Florida document number <u>し </u>	were filed on 10 (1) (202)	2_ and assigned
A. If amending name, <u>enter the new name of the limited liab</u>	illity company here:	
Fine Touned LLC The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable:	16279 E Trafalgar Dr	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Loxahatcher FL	33470
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	16279 E Trafalgar Loxabatchee, FL address on our records, enter the name	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	7
	City	Zto Code
New Registered Agent's Signature, if changing Registered Agent:	the state of the s	e
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am for provided for in Chapter 605, F.S. Or,	amiliar with and if this document is
If Chai	nging Registered Agent, Signature of New Reg	istered 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
			□Add
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Changa

				<u> </u>	
				<u> </u>	
					
				•	
					
		 			
				· -	
ective date if (other than the date of	`filing•		(optional)	
n effective date is li te: If the date in	isted, the date must be speci	ific and cannot be prior s not meet the applic	able statutory filing rec	han 90 days after filing.) Pur quirements, this date will	suant to 605.020' not be listed as
cord specifies a	delayed effective date, b	ut not an effective ti	ime, at 12:01 a.m. on th	ne earlier of: (b) The 90	th day after the
					-
	16 / 2027	, کــــد			
ted <u>05</u>					
ied <u>05</u>	05 - 16- 16 / 2023 Od- Signature	W			