

L23000036802

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

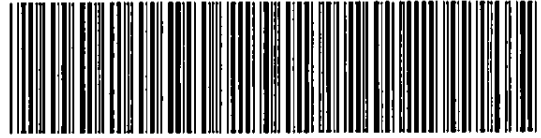
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2023 APR -3 AM 10:29
CLERK OF STATE
TALLAHASSEE, FL



1240 Riverside Drive, Titusville, FL 32780

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

To whom it may concern,

Please find the enclosed request to add William A Pringle as an Authorized Member (AMBR) to Tranquility One, LLC. I mistakenly left this off when I originally applied to form the LLC on January 17, 2023.

If you have any questions please call me at 617-513-1971.

Very Sincerely,

William A Pringle
CEO & Founder
Tranquility One, LLC

will@tranquilityone.com
c. 617-513-1971

2023 APR -3 AM 10:29
FILED
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRANQUILITY ONE, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

WILLIAM A PRINGLE
Name of Person

TRANQUILITY ONE, LLC
Firm/Company

1240 RIVERSIDE DR.
Address

TITUSVILLE, FL 32780
City/State and Zip Code

WILL@TRANQUILITYONE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILL PRINGLE at (617) 513-1971
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2023 APR - 3 AM 10:29

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TRANQUILITY ONE, 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 JANUARY 17, 23 and assigned Florida document number L23000036802.

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 "L.L.C."

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

Florida

City

Zip Code

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.

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	Name	Address	Type of Action
AMBR	WILLIAM A. PRINGLE	1240 RIVERSIDE DR. TITUSVILLE, FL 32780	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

2023 APR 19 11:29 AM EDT
STATE OF FLORIDA

[illegible]

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.

Dated MARCH 29, 2023

WILLIAM A. PRINGLE

Typed or printed name of signee

2023 APR -3 AM 10:29
STATE
FL