L23000120323

(Requestor's Name)	
(Hogastor or Herror)	
(Address)	<u> </u>
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	-
Certified Copies Certificates of Sta	atus
Special Instructions to Filing Officer:	

Office Use Only

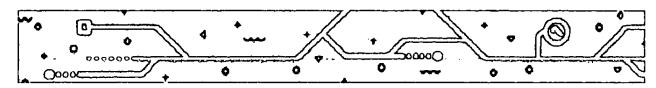


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A. RIVERS



zenbusiness

04/26/2023

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

RE: TONECO LLC

To Who	m It May Concern:
	Attached please find the executed <u>Articles of Amendment</u> for the above referenced. Eview and file the attached document on a routine basis.
	Once completed please forward the filed confirmation or notification to the address listed
below:	ZenBusiness Inc.
	Attention: Nicholas B
	5511 Parkerest Dr. Ste 103

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

Austin, TX 78731

Thank you.

Nicholas ZenBusiness Customer Success

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TONECO LLC	
(<u>Name of the Limited Liability Company as it now a</u> (A Florida Limited Liability Comp	ppears on our records.) any)
The Articles of Organization for this Limited Liability Company were filed of Clorida document number <u>L23000120323</u> .	on 03/07/2023 and assigned
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability compar	ny here:
he new name must be distinguishable and contain the words "Limited Liability Company."	the designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	20
	HA TI
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
rading address MAT BE ATOST OFFICE BOAT	
	<u> </u>
If amending the registered agent and/or registered office address on ogent and/or the new registered office address here:	رے our records, <u>enter the name of the new registe</u>
Name of New Registered Agent:	
New Registered Office Address:	
	r Florida street address
	, Florida
Cin-	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 amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	SHIRA ABERGEL	2640 NORTHEAST 135TH STREET APT 404	□Add
		NORTH MIAMI, FL 33181	Remove
			□Change
			🗆 Add
			□ Remove
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Note:	tive date, if other fective date is listed, the If the date inserted ment's effective date	l in this block doe	s not meet t	he applicable	late of filing or e statutory fili	more than 90 days	optional) : after filing.) Pi s. this date wil	rsuant to 605.0207 I not be listed as
recor d is fil	rd specifies a delayoniled.	ed effective date, b	out not an ef	fective time.	, at 12:01 a.m	. on the earlier c	of: (b) The 9	Oth day after the
	April 26th	· .	. 20	23				
ated								
Dated	/S/ Niall M	Macualay Signatur						