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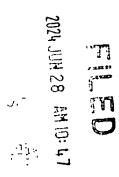
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COVER LETTER

	Registration Se Division of Cor				
ABC Toy St		torage L.I.C			
SUBJECT	l:	Name of Lim	ited Liability Company		
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retu	ırn all correspo	ndence concerning this matter	to the following:		
		Gregory S Uchimura			
			Name of Person		
		RKC Site Solutions LLC			
			Firm/Company		
		522 S Hunt Club Blvd # 14	47		7024 JUH 28 AM 10: 47
			Address	•	室 ~
		Apopka, Fl 32703			H 28 A
			City/State and Zip Code		<u> </u>
		guchimura@rkcsitesolution		.154	<u>ئے</u>
			to be used for future annual report notifi	cation) · ,	_
For further	r information co	oncerning this matter, please c	all:		
Gregory S	Uchimura		813 394-6980 at ()		
	Name o	l'Person	Area Code Daytime	Telephone Number	
Enclosed i	is a check for th	ne following amount:			
□ \$25.00	0 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 Statu. Certified Copy (additional copy is enclo	
R	1ailing Addres Registration S	Section	Street Address: Registration Sec		
Division of Corporations P.O. Box 6327		Division of Corp The Centre of Ta			
	allahassee, I			Street, Suite 810	

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ABC toy Storas	aell'-	
(Name of the Limited Liability Comr	piny as it now appears on our recor Liability Company)	ds.)
The Articles of Organization for this Limited Liability Compan Florida document number 1.23000280189	y were filed on 06/09/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
First Tyr Solutions LLC		202 ^u
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "L.L.	\
Enter new principal offices address, if applicable:		2 pres
(Principal office address MUST BE A STREET ADDRESS)		10
		5 0
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:	e address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	ess
	. F	lorida
	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

<u>Title</u>	Name	Address	Type of Action
			□Remove
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