Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000262316 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone : (323)962-8600 Fax Number : (323)389-0502

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TOBASII LLC

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JUL 2 8 2023

Registration Section

TO:

From: Jenni Munoz

## **COVER LETTER**

Division of Cor	porutions		
TOBASH SUBJECT:			-
	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subm	itted for filing.	
Please return all correspo	indence concerning this matter to	the following:	
	Cheyenne Moseley		
		Name of Person	
	Legalzoom.com, Inc.		
		Firm/Company	
	101 N Brand Blvd 11th Fl		
		Address	
	Glendale, CA 91203		
		City/State and Zip Code	
	rukyehase@gmail.com		<del>2 </del>
	E-mail address: (to	be used for future annual report notifi	Callon)
For further information of	onceming this matter, please cal	i:	
Cheyenne Moseley		800 773-0888 at ( )	
Name (	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
	-	■ \$55.00 Filing Fee &	□ \$60.00 Filing Fee.
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 To:

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

LegalZoom.com, Inc.

TOBASH LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.23000326240	were filed on 07/10/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:	122 E. Main Street #158	
(Principal office address MUST BE A STREET ADDRESS)	Lakeland, FL 33801	
		·····
Enter new mailing address, if applicable:	122 E. Main Street #158	
(Mailing address MAY BE A POST OFFICE BOX)	Lakeland, FL 33801	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:	Mice address on our records, <u>enter th</u> <u>e</u> :	e name of the new
New Registered Office Address:		-
Her registered Office Auditess.	Enter Florala street address , Florida	Zip Code —
New Registered Agent's Signature, if changing Registered Agent:	9	2) U

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:

2023-07-27 12:33:30 PDT

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			D Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			□ Change
**************************************		where the same and	
			□ Remove
			□ Change
			☐ Add
			☐ Remove
			[] Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	<del></del>
	***************************************
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Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to Note:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	o 605.0207 (3 : listed as th
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e ) The 90th day after the record is filed.	arlier of:
Dated 07/27/23	
Signature of a member or authorized representative of a member	_
Rukeywe Ojameruaye	
Typed or printed name of signee	<b>-</b>

Page 3 of 3

Filing Fee: \$25.00