## L23000332655

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## **COVER LETTER**

TO:	Registration Se Division of Cor				
(15 15% F 27)		PERTIES LLC			
SUBJE	u:	Name of Limi	ted Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	nitted for filing.		
Please re	eturn all correspo	ndence concerning this matter t	to the following:		
		Anupama Chapalamadugu			
		<del>-</del> .	Name of Person		<b></b>
		TAN PROPERTIES LLC			
			Firm/Company		_
		14432 Eagle Pointe Dr			
			Address		_
		Clearwater/FL 33762			
		anumalempati@hotmail.con	City/State and Zip Code		2023 PICV 29
		` <del>-</del>	o be used for future annual i	report notification)	
For furtl	ner information co	oncerning this matter, please ca	ill:		
	Anupama Ch	apalamadugu	813	765-9137	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Name of	Person	at () Area Code	Daytime Telephone Number	r
Enclosed	d is a check for th	e following amount:			
□ \$25	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy tadditional copy is encl	Certifica (osed) Certified	ite of Status &
	Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Divisior The Cer 2415 N.	Idress: ution Section of Corporations utre of Tallahassee Monroe Street, Suite 8 ssee, FL 32303	310

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAN PROPER	TIES LLC		
( <u>Name of the Limited Liability</u> (A Florida I	Company as it now appear Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on	07/13/2023	and assigned
Florida document numberL23000332655	<del>_</del> ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company he	ere:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the d	esignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			<del></del>
(Principal office address MUST BE A STREET ADDRI	ESS)		
Enter new mailing address, if applicable:			22
(Mailing address MAY BE A POST OFFICE BOX)			O
			9
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our r	ecords, <u>enter the n</u> a	ame of the new register
Name of New Registered Agent:	Anupama Chap	palamadugu	
New Registered Office Address:	14432 Eagle Poi	nte Dr	
	Enter Flor	ida street address	
	Clearwater	, Florida <sub>.</sub>	33762
	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>	<u>Name</u>	Address	Type of Action
President	Anupama Chapalamadugu	14432 Eagle Pointe Dr	_ <b>≣</b> Add
		Clearwater, FL 33765	_ □Remove
	CHAPALA NADUGU.		_ □Change
RA	Nageswararao	14432 Eagle Pointe Dr	_ 🗆 Add
		Clearwater, FL 33762	_ <b>≡</b> Remove
			_ 🗆 Change
MGR	Chapalamadugu NGGCSWOSWAD	14432 EaglePointe Dr	_ □Add
		Clearwater, FL 33762	_ ■Remove
			_ 🗆 Change
			, 🖘
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			_ □Remove
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record spec I is filed.	tifies a delayed effective date, b	ut not an effective time, at 12:01 a.m. on the	earlier of: (b) The 90th day after the
ated	November, 15th	, 2023	
		Anylo	
_	Signatur	e of a member or authorized representative of a m	nember
		America Clarity	
		Anupama Chapalamadugu  Typed or printed name of signee	