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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration So Division of Cor				
SUBJECT: TYMO	othy Brothers LLC			
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Timothy f	1 Brothers Name of Person		
	TimothyBroth	ners LLC	 :	2014年22
	9834 Hound C			H 22 Fil
	Gibsonton, F	L 3353 4 City/State and Zip Code		FILE 19
	timothy-brod E-mail address: (ther SICO amil. (C	ification)	
For further information of	concerning this matter, please ca	all:		
Timothy A.	Brothers	at (813) 819 - Area Code Daytin	1465	
Name C	r reison	Area Code Daytii.	ne retephone (varioe)	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
Mailing Address Registration		<u>Street Address:</u> Registration Se		
Division of C P.O. Box 632	•	Division of Co The Centre of	•	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Timothy Bro (Name of the Limit	thers LLC ed Liability Company	as it now appears on obility Company)	ur records.)		
The Articles of Organization for this Limited Li Florida document number <u>L2300053</u>	ability Company w			and ass	igned
This amendment is submitted to amend the follo	condiment is submitted to amend the following: mending name, enter the new name of the limited liability company here: ame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." ew principal offices address, if applicable: and office address MUST BE A STREET ADDRESS) ew mailing address, if applicable: address MAY BE A POST OFFICE BOX) tending the registered agent and/or registered office address on our records, enter the name of the new registered				
A. If amending name, enter the new name of	the limited liabili	ty company here:			
The new name must be distinguishable and contain the w	ords "Limited Liability	· Company," the designa	tion "LLC" or the	e abbreviation "L.	L.C."
Enter new principal offices address, if applications	able:				
(Principal office address MUST BE A STREE	T ADDRESS)			 	 -
Enter new mailing address, if applicable:				122	
(Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>		<u> </u>	777 70	
B. If amending the registered agent and/or reagent and/or the new registered office addres		dress on our record	ls, <u>enter the n</u>	ame of the new	v registe <u>red</u>
Name of New Registered Agent:	Timoth	4 A Bro	thers		
New Registered Office Address:	984 Ho	und Cha Enter Florida str	Se d Vi	v e	<u> </u>
	Gibson	ton	, Florida	33 53 L	<u>t</u>

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.

Toron A Brothers

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
MGR	Cassie M Clingon	9834 Hound Chase drive Ribsonton, FL 33534	[\
			□Remove
			Change
AMBR	Timothy A Brothers	9834 Hound chase drive	Add
	J	9834 Hound chase drive Gibsonton, FL 33534	Change
			22 ☐Add
			□Change
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			□Remove
		<u> </u>	□Change
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Effective fan effectiv	date, if other than t	the date o	f filing: _ ific and ca	nnot be prio	r to date of	filing or mo	re than 90 c	_ (optio	nal) iling.) Pur	suant to 6	50 5 .0207 (.
Note: If t	he date inserted in this 's effective date on the	s block doe	s not mee	t the applic	rable statu	itory filing	requirem	ents, this	date will	not be l	isted as ti
e record sp rd is filed.	pecifies a delayed effec	ctive date, t	out not an	effective t	ime, at 12	:01 a.m. o	n the earli	er of: (b)	The 90	th day a	fter the
Dated	1-15		· · · · ·	202	<u> </u>						
	Insty	A Ros Signatu	their re of a mer	nber or auth	orized rep	resentative (of a membe	r			
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