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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TDK Palm Beach Prime Scority, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Diems R Torchon Name of Person
TAK PALM BEACH PRIME SECURITY Firm/Company
2695 N Military Trail Suite 5
West Palm Beach Fl 33409 City/State and Zip Code
HFMS 2695 @ Jahoo . (5M) E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (561) 667-2121 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
▼ \$25.00 Filing Fee

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOK Palm Beach Prime Saurity LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)			
The Articles of Organization for this Limited Liability Company were filed on 10-02-2024 and assigned Florida document number 240004260 28.			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	company here:		
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "L.L.C." or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	FIL.		
(Mailing address MAY BE A POST OFFICE BOX)	}		
	58		
B. If amending the registered agent and/or registered office addragent and/or the new registered office address here:	(Canal Cana		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		

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.

City

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>	<u>Address</u>	Type of Action
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J		1535 Blanding blvd Apt SOU, Middleburg FL.32068	□Remove
		FL.32068	□Change
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te:	ve date, if other than the date of filing:
core s fil	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the ed.
ed_	10-28-2024.
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Sirems R Torch on Typed or printed name of signee