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SECRETARY OF STATE TALLAHASSEE, FL

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COVER LETTER

TO:

Registration Section **Division of Corporations**

Tallahassee, FL 32314

	Patching LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	`Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Luis A. Mercedes			
		Name of Person	•	
	Tiger Tilt Patching, Paintii	ng & Concrete Repair, LLC.		
		Firm/Company	•	
	8524 Lazy River Dr.			
		Address		
	Tampa, Fl. 33617		2024 N SECF	un Signa- y
	tigertiltpatching@gmail.com	City/State and Zip Code n	2024 NOV -8 PM 3: SECRETARY OF ST TAILLAHASSEE, F	1000 pt.
	E-mail address: (to be used for future annual report notification)		
For further information of	concerning this matter, please c	all:	PM 3: 42 OF STATE SSEE, FL	
Luis A. Mercedes		813 447-2948 at ()	TATE	
Name o	of Person	Area Code Daytine Telephone Number	 	
Enclosed is a check for t	he following amount:			
☐ \$25.00 Filing Fee	☑ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	te of Status &	
Mailing Addre	Section	Street Address: Registration Section		
Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee		
1 NO. 100K VOZ	- •	The Comit of Landidosec		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co. (A Florida Lim	ompany as it now appears on our records ited Liability Company)	<u></u>)
The Articles of Organization for this Limited Liability Completion document number <u>L24000445214</u> .	pany were filed on 10/18/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Figer Tilt Patching, Painting & Concrete Repair, LLC.		
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	· 	
Principal office address MUST BE A STREET ADDRES.	S)	
Inter new mailing address, if applicable:		SEX. 282
Mailing address MAY BE A POST OFFICE BOX)		
		TA Y
3. If amending the registered agent and/or registered of		88 R
 If amending the registered agent and/or registered off gent and/or the new registered office address here: 	fice address on our records, <u>enter t</u>	
gent and/of the new registered office address here:		3: 42 STATI
N CN D L. I.		TE 2
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		rida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Tiger Tilt Patching LLC

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany has been notified in writing of this change.

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
HUGR	Henry O SAMEAUX	10208 NOKLAWA HA AUL THMAN FL. 33617	bbA <u>™</u>
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			□Change
			□Add
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			□ Change
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Tective date, if other than the	date of filing	•		(0	ptional)	
in effective date is listed, the date mus	a be specific and	cannot be prior to	date of filing or i	nore than 90 days a	ifter filing.) Pursuar	
ote: If the date inserted in this blocument's effective date on the Do			ne statutory mi	ig requirements,	inis date will not	ne fisted as
ecord specifies a delayed effective is filed.	e date, but not a	an effective tim	e, at 12:01 a.m.	on the earlier of	; (b) The 90th d	ay after the
November 2		2024				
	1.70	1 1.1.	I	e of a member		

Typed or printed name of signee