

K21000162615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

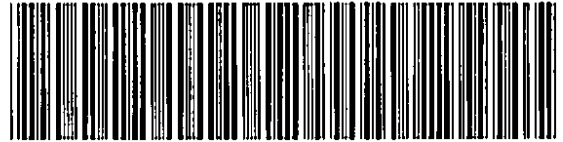
(Document Number)

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05/24/21--01016--022 **25.00

21 MAY 24 PM 1:02

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TRINLE Business Services, 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:

Trinnett L. Edwards
Name of Person

TRINLE Business Services, LLC
Firm/Company

11701 Palm Lake Dr. # 1114
Address

Jacksonville, FL 32218
City/State and Zip Code

Trinnett@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Trinnett L. Edwards at (904) 418-1163
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

THINLE Business Services, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on April 8, 2021 and assigned Florida document number L21000162615 → L21000162615

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Will keep the (same) name
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: Principal Address will remain the (same)
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: Mailing Address will remain the (same)
(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Remains the (same)

New Registered Office Address: Remains the (same)
Enter Florida street address

Remains the (same) Florida (same)
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.

Remains the (same)
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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Trinnett L. Edwards	11701 Palm Lake Dr. #1114	Jacksonville, FL <input checked="" type="checkbox"/> Add 322
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kee'anna J. Williams	11701 Palm Lake Dr. #1114	Jacksonville, FL <input type="checkbox"/> Add 322
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

* Updating (Manager) to myself: Trinnett L. Edwards
as I wasn't able to add my own name when
I originally filed for my "Articles of Organization"
so I added my daughter's name: Kee'lnae J. Williams
in order to complete the filing process.

* I would like to have her name removed and
replaced with my name as I am the Business Owner
and Officer of the Business. I'm not sure if
I will need to add an additional filing date on
→ Section "E." : I will add the original filing date
of April 8th, 2021.
Thank you so much!

E. Effective date, if other than the date of filing: April 8, 2021 (optional) ^{Original Filing Date}

(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 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Today's Date ↓
Dated 5/17/2021 May 17, 2021

Trinnett L. Edwards
Signature of a member or authorized representative of a member

Trinnett L. Edwards
Typed or printed name of signer