

LOLE0000020459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

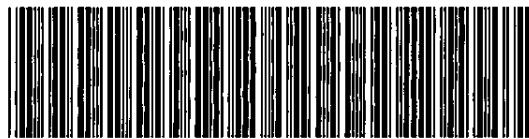
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRI PREMIER HOLDINGS LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Renee Smith
(Name of Person)

LAW HCOMP LLC
(Firm/Company)

650 West Ave #1504
(Address)

MIAMI Bch, FL 33319
(City/State and Zip Code)

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For further information concerning this matter, please call:

Michael Smith at (440) 327-5142
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2006

MICHAEL SMITH
P.O. BOX 191857
MIAMI BEACH, FL 33119

SUBJECT: TRI PREMIER HOLDINGS LLC
Ref. Number: L06000020459

We have received your document for TRI PREMIER HOLDINGS LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Document Specialist

Letter Number: 406A00058344

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2006

MICHAEL SMITH
P.O. BOX 191857
MIAMI BEACH, FL 33119

SUBJECT: TRI PREMIER HOLDINGS LLC
Ref. Number: L06000020459

We have received your document for TRI PREMIER HOLDINGS LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Document Specialist

Letter Number: 806A00061646

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: TRU Premier Holdings LLC

2. The mailing address of the limited liability company is : P.O. BOX 191857 MIAMI Bch, FL 33119

3.24.06
3. Date of filing/registration in Florida

LD6000020459
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

WALTON VAN DUFF Schwab & Carson
- Name
9350 S. Dixie Hwy floor 10
Address
MIAMI FL 33156
City, State and Zip

6. The name and address of the new registered agent and/or office:

LAU Hcomp LLC
Name
650 West Ave #1504
Florida street address (P.O. Box NOT acceptable)
MIAMI Bch FL 33139
City, State and Zip

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
(Signature of a member or authorized representative of a member)

Renee Smith
(Printed or typed name of signee)

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 608, 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.

[Signature]
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00