

LD60000097954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

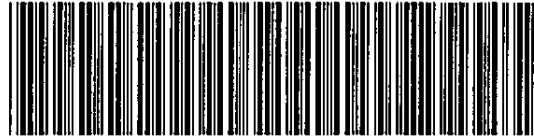
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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Triumphant 4 Investments 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:

Dswald J. Miller III
(Name of Person)

Triumphant 4 Investments LLC
(Firm/Company)

8340 N.W. 191st Lane
(Address)

Hialeah, FL 33015
(City/State and Zip Code)

For further information concerning this matter, please call:

Dswald J. Miller III at (305) 829-7818 or 785-3034
(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

November 14, 2006

OSWALD J. MILLER III
8340 NW 191ST LANE
HIALEAH, FL 33015

SUBJECT: TRIUMPHANT 4 INVESTMENTS LLC
Ref. Number: L06000097954

We have received your document for TRIUMPHANT 4 INVESTMENTS LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6853.

Leslie Sellers
Document Specialist

Letter Number: 506A00066621

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: TRILUMPHANT 4 INVESTMENTS LLC.
2. The mailing address of the limited liability company is: 17236 N.E. 4 PLACE
NORTH MIAMI BEACH, FL. 33162
3. Date of filing/registration in Florida: 10-2-06
4. Document number: LD6000097954

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

SPIEGEL + UTRERA, P.A.
Name
1840 SW 22ND ST. 4TH FL.
Address
MIAMI, FL. 33145
City, State and Zip

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

OSWALD J. MILLER III
Name
8340 N.W. 191ST LANE
Florida street address (P.O. Box NOT acceptable)
HALEAH, FL 33415
City, State and Zip

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.

D. Miller III
(Signature of a member or authorized representative of a member)

OSWALD J. MILLER III
(Printed or typed name of signer)

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.

D. Miller III
(Signature of Registered Agent)

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