

L07000047930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

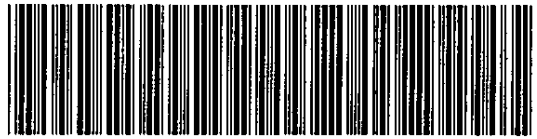
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 APR -6 PM 2:02

T. HAMPTON

MAY -7 2010

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: TRI S, 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:

**SAMIR SOLIMAN**

Name of Person

**SHELL EXPRESS**

Firm/Company

**2410 W OAKRIDGE RD**

Address

**ORLANDO FL 32809**

City/State and Zip Code

**samsamirsol@yahoo.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**SAMIR SOLIMAN**

Name of Person

at ( **419** )

**320-6849**

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/COURIER ADDRESS:**

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

TRI S, LLC.

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	SAMEH SOLIMAN	3813 DOUBLE EAGLE CT #3224 ORLANDO FL 32839	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	FADY SOLIMAN	3813 DOUBLE EAGLE CT #3224 ORLANDO FL 32839	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	NAHEH SOLIMAN	3813 DOUBLE EAGLE CT #3224 ORLANDO FL 32839	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

SAMIR SOLIMAN	50
FADY SOLIMAN	25
NAHEH SOLIMAN	25

10 APR -6 PM 2:02

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Dated 5/1, 2010

*Samir Soliman*

Signature of a member or authorized representative of a member

Samir Soliman

Typed or printed name of signee