

L1200000415291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

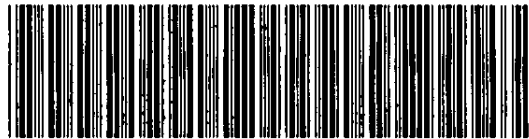
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/06/16--01022--008 **25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 07 2016

Y SULKER

Sarah K Lawrence
10729 Northridge Court
Trinity, FL 34655

May 31, 2016

To whom it may concern:

As of today, I terminate all interests in the entity Trinity Document Solutions, LLC. My share will be passed to Tracie Keeter as of June 1, 2016, giving her sole proprietorship.

All distribution and dissolution of company property and monies have been handled privately and to my satisfaction.

A handwritten signature in cursive script, appearing to read "Sarah K. Lawrence". The signature is fluid and written in dark ink.

Sarah K. Lawrence

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Trinity Document Solutions, Inc.
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:

Tracie Keeter

Name of Person

Trinity Document Solutions, Inc.

Firm/Company

3152 Little Road, #193

Address

Trinity, FL 34655

City/State and Zip Code

tracie@tridocsolutions.com

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

For further information concerning this matter, please call:

Tracie Keeter

Name of Person

at (727) 759-3627

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Trinity Document Solutions LLC

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

The Articles of Organization for this Limited Liability Company were filed on 3/26/2012 and assigned Florida document number L12000041529.

This amendment is submitted to amend the following:

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

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 office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

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:

Tracie Keeter

New Registered Office Address:

3152 Little Rd. #193

Enter Florida street address

Trinity

City

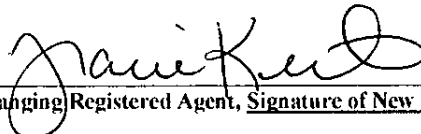
Florida

34655

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.



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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
mGRM	Sarah K Lawrence	10729 Northridge Ct.	<input type="checkbox"/> Add
		Trinity, FL 34655	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 6/1/16 (optional)


(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.

Dated June 1, 2016


Signature of a member or authorized representative of a member

Tracie Keeter
Typed or printed name of signee