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, (Ad	dress)			
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FILED 12 MAY 29 PM 12: 05 SENT AND STATE 1 AND SEE, PLOIDA

K.SALY EXAMINER MAY 31 2012

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Tri - Vet Property 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:					
Melvin Helphrey Name of Person					
Firm/Company					
1501 A Belcher Rd 5					
City/State and Zip Code Mh 77 44 Daol Com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Name of Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee \& \text{Certified Copy} \\ (additional copy is enclosed)\$\$ \$60.00 Filing Fee, \text{Certificate of Status \& Certified Copy} \\ (additional copy is enclosed)\$\$ \$60.00 Filing Fee, \text{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

ARTICLES OF ORGANIZATION	FILED'
· OF	10 44.
	12 MAY 29 PH 12: 0
(Name of the Limited Liability Company as it now appears on our records (A Florida Limited Liability Company)	Sharra
(Nome of the I imited Victorial Comment of the new	SLERE LARY OF STATE BALLAHASSEE BLOOSE
(Name of the Limited Liability Company as it now appears on our records (A Florida Limited Liability Company)	BULLATION SEE, PA OR IS
The Articles of Organization for this Limited Liability Company were filed on	12 and assigned
Florida document number 120000 67722	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
Tri-Vet Properties LLC	
The new name must be distinguishable and end with the words "Limited Liability Company," the designate "L.L.C."	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
(Avintable office and as Mod I no / Billion / Mod Rose)	
- 	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, en	ter the name of the new
registered agent and/or the new registered office address here:	
·	
Name of New Registered Agent:	
New Projectored Office Address.	
New Registered Office Address: Enter Florida stree	at addrass
Litter r tortau stree	1 14441 C33
, Florid	la

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 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

MGKM = M	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
NGRM	Melvin Helphrey	1501 A Balchen Rd 5 A-1 Largo, PL 33771	Add Remove
MGRA	Saw boarder, LLC	101 A Bilcher Rd 5 A-1 Lays, FL 33771	Add Remove
			Add Remove
			Add Remove
	•		Add Remove
			Add Remove
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
			_ _
Dated	/23/2012, Molecular for for the state of a relative or o	or authorized representative of a member	
)/)	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00