

L12000076642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

B. BOSTICK

JUL - 9 2013

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Trust Protection Group 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:

Milton Fuentes, Esq.

Name of Person

M. Fuentes & Co.

Firm/Company

P.O. Box 431725

Address

Miami, Florida 33243

City/State and Zip Code

mf@mfuenteslaw.com

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

For further information concerning this matter, please call:

Milton Fuentes

Name of Person

at 305 447-1960

Area Code & Daytime Telephone Number

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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**

Trust Protection Group 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 06/08/2012 and assigned  
Florida document number L12000076642.

This amendment is submitted to amend the following:

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

Torres Protection Group LLC

The new name must be distinguishable and end with 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)**

1951 NW 7th Avenue

Ste 160-110

Miami, Florida 33136

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

1951 NW 7th Avenue

Ste 160-110

Miami, Florida 33136

**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:

New Registered Office Address:

1951 NW 7th Avenue, Ste 160-110

*Enter Florida street address*

Miami

*City*

Florida 33136

*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 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.*

**If Changing Registered Agent, Signature of New Registered Agent**

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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			<input type="checkbox"/> Remove
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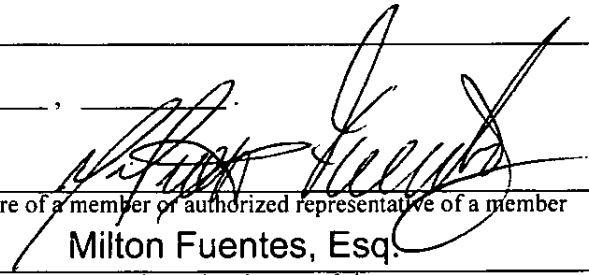
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TALLAHASSEE, FL 32301  
2013 JUL 18 PM 2:57

P

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_, \_\_\_\_\_



Signature of a member or authorized representative of a member

Milton Fuentes, Esq.

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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