

L12000135565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP☐ WAIT☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

**Special Instructions to Filing Officer:**

Office Use Only



100252244511

10/10/13--01006--011 \*\*25.00

FILED

2013 OCT 10 PM 12:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SECRET 11/1/61

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Three Dragons, 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:

**Justin Jones**

Name of Person

**Three Dragons, LLC**

Firm/Company

**250 Galen Drive, Apt 54**

Address

**Key Biscayne, FL 33149**

City/State and Zip Code

**justin@ready4.com**

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

For further information concerning this matter, please call:

**Desiree Hervas**

Name of Person

**305 361 6728**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 16, 2013

JUSTIN JONES  
250 GALEN DRIVE APT. 54  
KEY BISCAYNE, FL 33149

SUBJECT: THREE DRAGONS, LLC  
Ref. Number: L12000135565

We have received your document for THREE DRAGONS, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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) 245-6051.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 113A00021726

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

FILED  
2013 OCT 10 PM 12:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Three Dragons, 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 10/24/2012 and assigned  
Florida document number L12000135565.

This amendment is submitted to amend the following:

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

n/a

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:

n/a

**(Principal office address MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable:

n/a

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

**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:

n/a

New Registered Office Address:

Enter Florida street address

Florida

City

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

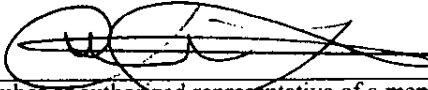
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Russell Dean	Le Regina	<input checked="" type="checkbox"/> Add
		15 Boulevard des Moulins	<input type="checkbox"/> Remove
		MC 98000 Monaco	
			<input 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

n/a

Dated September, 9th, 2013



Signature of a member or authorized representative of a member

Allan Justin Jones

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
2013 OCT 10 PM 12:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA