*L13000024852

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COVER LETTER

TO: R

Registration Section
Division of Corporations

SUBJECT

LLC AMND TS HOLDINGS RPB 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:

ANTHONY NOHRA

Name of Person

TS HOLDINGS RPB LLC

Firm/Company

17301 HAMPTON BLVD

Address

BOCA RATON/FL 33496

City/State and Zip Code

ANTHONYNOHRA@GMAIL.COM

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

For further information concerning this matter, please call:

ANTHONY NOHRA

305₈₇₇₇₅₅₆

Name of Person

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)

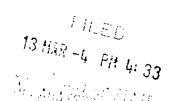
MAILING ADDRESS:

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



TS HOLDINGS RPB 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	y Company were filed on 02/18/2013	and assigned
Florida document number L13000024852	 .	
This amendment is submitted to amend the following	; :	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
B. If amending the registered agent and/or re registered agent and/or the new registered office a		enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet aaaress
	, Flor	
	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 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>	Address	Type of Action
MGRM	Anthony Nohra	17301 Hampton Blvd	Add
		Boca Raton Fl 33431	Remove
MGR	Stephane Nohra	17301 Hampton BLVD	Add
		Boca Raton Fl 33496	Remove
MGRM	Stephane Nohra	17301 Hampton BLvd	
		Boca Raton FL 33496	Remove
			Remove
			Add Remove
			Remove

D. If ar	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Anthony Nohra President and Managing Member
	Stephane Nohra Vice President and Managing Member
Dated _	· · · · · · · · · · · · · · · · · · ·
	Signature of a member of authorized representative of a member
	- Antonia Molia
	Typed or printed name of signee

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Filing Fee: \$25.00