

L13000079790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

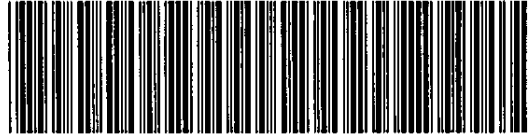
(Business Entity Name)

(Document Number)

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

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15 MAY 11 AM 11:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 11 2015

T. HAMPTON

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Trinity Ventures V, 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:

Theresa M. Stacy

Name of Person

Trinity Ventures V, LLC

Firm/Company

5173 Kernwood Court

Address

Palm Harbor, FL 34685

City/State and Zip Code

brian@trinityuvclighting.com

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

For further information concerning this matter, please call:

Theresa M. Stacy

at ( 813 )

382-8707

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 22, 2015

TRERESA M STACY  
5173 KERNWOOD COURT  
PALM HARBOR, FL 34685

SUBJECT: TRINITY VENTURES V LLC  
Ref. Number: L13000079790

RECEIVED  
15 MAY 11 PM 10:00  
DIVISION OF CORPORATIONS  
BUREAU OF CORPORATE  
INFORMATION SERVICES

We have received your document for TRINITY VENTURES V LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

If you want the LLC to reflect your new married name then that must be in the amendment.

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.

Tim Burch  
Regulatory Specialist II

Letter Number: 415A00008093

03/24/2015

Division of Corporations  
P.O. BOX 6327  
Tallahassee, FL 32314

To Whom It May Concern,

I am writing this letter to inform you that I am the sole owner of Trinity UVC Lighting, LLC. The EIN is 46-4921160, document number is L14000032589, and a filing date of 02/26/2014.

I am submitting a Statement of Termination as this Limited Liability Company has completed all activities under this employer Identification Number.

I wish to give my permission to release the name (Trinity UVC Lighting, LLC) for the sole purpose of a name change to my other company. This permission is to avoid the 180 hold that is normally placed on terminated names.

I am also the sole owner of Trinity Ventures V, LLC. The EIN is 46-2902930, document number is L13000079790, and a file date of 06/03/2013.

I am submitting a Statement of Amendment to change Trinity Ventures V, LLC name to Trinity UVC Lighting, LLC.

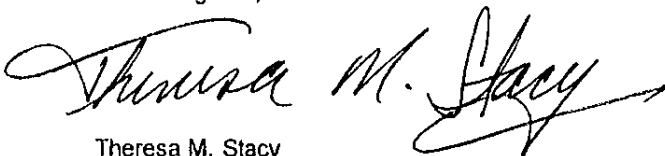
Please be aware that as of 10/11/2014 I was married and my name was changed to Theresa M. Stacy.

Please allow for this change to take effect upon receipt of these documents.

If you have any questions regarding these matters please contact me at 813-382-8707.

In addition I give full authority to discuss this matter with Brian M. Stacy for the sole purpose of the termination and name changes describe above.

Warm Regards,



Theresa M. Stacy  
Managing Member

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15 MAY 11 AM 11:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Trinity Ventures V, 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 06/03/2013 and assigned  
Florida document number L13000079790

This amendment is submitted to amend the following:

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

Trinity UVC Lighting, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "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) \_\_\_\_\_

**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: \_\_\_\_\_

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 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA

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

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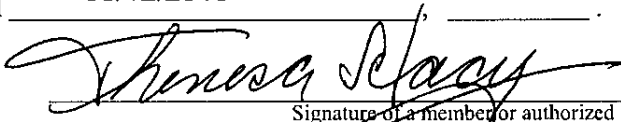
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 03/12/2015



Signature of a member or authorized representative of a member

Theresa M. Stacy

Typed or printed name of signee

Page 3 of 3  
Filing Fee: \$25.00

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