## #1/3000/03435

(Re	questor's Name)		
(Address)			
(Ad	dress)		
(Cit	ry/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
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13 SEP -3 PM 1:58

SECRETARY OF STATE

SECRETARY OF STATE

K. SALY EXAMINER

SEP - 5 2013



August 16, 2013

COLOOSEHATCHE TAX LAWRENCE SWAN 709 CAPE CORAL PKWY W CAPE CORAL, FL 33914

SUBJECT: R TRIPLEO LLC Ref. Number: L13000103435

We have received your document for R TRIPLEO LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Letter Number: 913A00019629

Karen A Saly Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: R TRIPLEO 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:

Lawrence Swan

Name of Person

Caloosehatche Tax

Firm/Company

709 Cape Coral Pkwy W

Address

Cape Coral FL 33914

City/State and Zip Code

ofer.pr@gmail.com

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

For further information concerning this matter, please call:

Lawrence Swan

,<sub>,</sub>239、540-2612

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

FILED

13 SEP -3 PM 1:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R TRIPLEO 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 Liabil	ity Company were filed on 07/22/20	and assigned
Florida document number L13000103435	·	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	<u> </u>	
(Principal office address MUST BE A STREET A	DDRESS)	<del> </del>
	<del></del>	<del>.</del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)		
	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	rida 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>	Address	Type of Action
MGRM	Liora Pravda	709 CAPE CORAL PKWY V	✓ Add
		Cape Coral FL 33914	Remove
MGRM	Ofer Pravda	709 Cape Coral PKwy W Cape Coral, Fl 3391	14 D
		upe wai, re son	Remove
			Add
			Remove
			Add
			Remove
		Add	
			Remove
			Add
			Remove

D. If amending any other inform	nation, enter change(s) here: (Attach additional sheets, if necessary.)
Dated 14th August	2013
	uda Sepil
Š	gnature of a member or authorized representative of a member
Linda Lepore	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00