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## **COVER LETTER**

TO: Registration Section Division of Corporations							
SUBJECT: TRIPLE F. ENTERTAINMENT LLC Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
BRTAN RANL Name of Person							
Firm/Company							
700 W HEll Shoro Bluto Address							
DEELFIELD BEACH FL 33441 City/State and Zip Code							
BLTANC MACHINE GUNFARELLA . COM E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
BRIAN RAH (407) 738-4882							
Name of Person Area Code & Daytime Telephone Number							
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314							
Enclosed is a check for the following amount:							
□ \$25 Filing Fee & Certified Copy							

INHS18 (2/14)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: TRIPLE + FNTE	ERTA	はてるかって	LL			
2.	(a)	(b)						
				Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
		5825 U. IRIO BRONSON MEN Huy		SAME				
		KISSIMMER, FL 34746					<del></del>	
		12/2013	-12	000172	140			
3.		Date of filing registration in Florida 4.		cument number				
5.	(a)							
٥.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of	f State:					
		ROBERT KAN-IAN						
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
		314 CIEMATES ST 201						
		WEST Palm BEACH , FL 33401						
4	(b)	BRIAN RAHI			. ;	16 AF		
	. ,	Enter name of NEW Registered Agent and/or NEW Registered Office address:				APR 2		
						26 PI		
		NEW Registered Office Address:				PH I2:	÷ . "	
		700 W HITISboro BluD				<u>න</u>		
		DEERFTEID BEACH, FL 3341	<u> </u>		•			
the age was	cha nt w s/we	imited liability company is not organized under the laws of the State or organized or changes are made, the Florida street address of the registered of will be identical. Or, in the case of a Florida limited liability company are authorized by an affirmative vote of the members of the limited liability of organization or the operating agreement of the limited liability	office and, it is healthis is the ability company comp	d the business of creby confirmed company or as othing.	ffice of that the erwise	the reg chang provid	gistered e(s)	
<u> </u>	1	P,	ripu	AAH C inted or typed name				
pro the to n	visi obli nere	by accept the appointment as registered agent and agree to act in this ons of all statutes relative to the proper and complete performance of igations of my position as registered agent as provided for in Chapter ly reflect a change in the registered office address, I hereby confirm to writing of this change.	s capacit f my duti r 605, F. that the	y. I further agre ies, and I am fam S. Or, if this do limited liability	ee to con niliar wi cument compan	nply with and is being has i	ith the accept g filed been	
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Sig	natu	re of Registered Agent		•				