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SECURITARY OF STATE ALLAMASSEE, FLOREIS

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## COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Tirpak Investments, 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:

Harold E. Wolfe, Jr., Esq.

Name of Persor

Harold E. Wolfe, Jr., P.A.

Firm/Company

2300 Palm Beach Lakes Blvd., #302

Address

West Palm Beach, FL 33409

City/State and Zip Code

hewjrlaw@comcast.net

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

For further information concerning this matter, please call:

Harold E. Wolfe, Jr., Esq.

...561、697-4100

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 2014 JUN 30 PM 12: 53

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Tirpak Investments, LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on May 6, 2014 and assigned	
Florida document number L14000077220		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
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:		
• • •	al .	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:	4123 122nd Drive North	
(Mailing address MAY BE A POST OFFICE BOX)	Royal Palm Beach, FL 33411	
	ed 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:		
Tivil Registered Office Padress.	Enter Florida street address	
	Florida	
<del></del>	, Florida	

## 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

<u>tle</u>	<u>Name</u>	Address	Type of Action
		<del></del>	□ Add
			☐ Remove
		<del></del>	□ Remove
			□ Add
			□ Remove
		····	Remove
_ <del></del>	<del></del>		
		Remove	
			Add
			Remove

. If aı	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(The	cetive date, if other than the date of filing:
	June 26 , 2014
	( Panel E. Wolfela-
	Signature of a member of authorized representative of a member
	\ / / Harold E. Wolfe, Jr., Esq.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

