

L15000 164631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

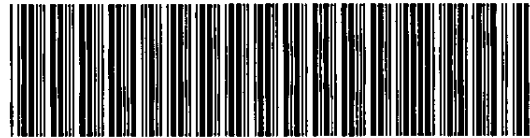
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 OCT -8 AM 8:38
STATE OF ARIZONA

OCT 09 2015
J SHIVERS

The Law Offices of
ROBERT L. BARNES, JR., P.L.

a Professional Limited Liability Company

111 S. Armenia Ave.
Suite 202
Tampa, Florida 33609

Tel. 813.288.8031
Fax 813.288.8041
e-mail: rbarnes@rbarneslaw.com

October 6, 2015

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: *T-Rose Investments of Florida, LLC - Amendment*

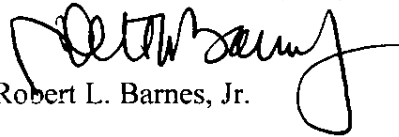
Dear Sir/Madam:

Please find enclosed an Amendment to the Articles of Organization for the above-referenced Florida limited liability company, together with a \$25.00 firm check for same.

Should you have any questions regarding this Amendment, please do not hesitate to contact me.

Very truly yours,

ROBERT L. BARNES, JR., PL


Robert L. Barnes, Jr.

RLB/kar
Enc.
pc: T-Rose Investments of Florida, LLC

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

T-Rose Investments of Florida, 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 09/28/2015 and assigned Florida document number L15000164631.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>
AMBR	Tal Shoshan	3880 E. Ebony St.	<input type="checkbox"/> Add
		Ontario, CA 91761	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tal Shoshan	3880 E. Ebony St.	<input checked="" type="checkbox"/> Add
		Ontario, CA 91761	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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