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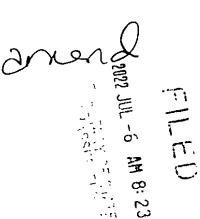
(Requestor's Name)
(Address)
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2022 JUL -6 PH 3: 50

A. RAMSEY
JUL 07 2022

COVER LETTER

TO: . Registration Section **Division of Corporations** TRINITARIAN ENTERPRISES, LLC SUBJECT: 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: **ERNIE T. GAMENG** Name of Person TRINITARIAN ENTERPRISES, LLC Firm/Company 1334 TIMBERLANE RD, STE 15 Address TALLAHASSEE, FL 32312 City/State and Zip Code e.t.gameng@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ERNIE GAMENG 850 987-0037 Daytime Telephone Number Name of Person Enclosed is a check for the following amount:

Mailing Address:

■ \$25.00 Filing Fee

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

☐ \$30.00 Filing Fee &

Certificate of Status

Street Address:

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

☐ \$60.00 Filing Fee,

Certificate of Status & Certified Copy

(additional copy is enclosed)

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

FILED

TRINITARIAN ENTERPRISES, LLC

2022 JUL -6 AM 8: 23

(<u>Name of the Limited Liability Comps</u> (A Florida Limited	Liability Company)		
The Articles of Organization for this Limited Liability Company Slorida document number	were filed on MARCH 14, 2016 and assigned		
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
¥A			
he new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1334 TIMBERLANE RD, STE 15		
Principal office address MUST BE A STREET ADDRESS)	TALLAHASSEE, FL 32312		
Enter new mailing address, if applicable:	1334 TIMBERLANE RD, STE 15		
Mailing address MAY BE A POST OFFICE BOX)	TALLAHASSEE, FL 32312		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here: ERNIE T. GAN			
1234 TIMDED	1334 TIMBERLANE RD. STE 15		
New Registered Office Address:	Enter Florida street address		
TALLAHASSE			
TALLADASE	Florida		

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 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>	Address	Type of Action
AMBR	ERNIE T GAMENG	1334 TIMBERLANE RD, STE 15	□Add
		TALLAHASSEE, FL 32312	□Remove
			■ Change
			□∧dd
			□Remove
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			□Remove
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			□Remove
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N/A 	
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Note: If the date in:	ther than the date of filing:
ne record specifies a cord is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated JULY 5	. 2022
1	
(~	Signature of a member or authorized representative of a member
ERNIE T	. GAMĖNG
	Typed or printed name of signee