

L16000079986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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HALL ASSESSMENT DIVISION

K. SALY  
OCT 17 2016



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 1, 2016

WAYNE TALAMAS  
3916 PALMARITO ST.  
CORAL GABLES, FL 33134

SUBJECT: TRIPPLEJ DORAL LLC  
Ref. Number: L16000079986

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

The documents submitted are incomplete. Please complete one and resubmit for filing. The amendment will work for any changes. The change of registered agent form can also be used to change the principal and mailing and registered agent.

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 516A00018650

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TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

Tripple J Doral 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:

Wayne Talamas  
Name of Person

Firm/Company

3916 Palmarito Street  
Address

Coral Gables FL 33134  
City/State and Zip Code

wtalamas@globalreadrx.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cindy Knight  
Name of Person

at (786)  
Area Code

703-1988  
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

**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. Name of the limited liability company: Tripple J Doral LLC
2. (a) 3916 Palmarito St. (b) 3916 Palmarito St.  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)  
Coral Gables FL 33134 Coral Gables FL 33134

3. April 25, 2016 4. L16 000079986  
Date of filing/registration in Florida Document number

5. (a) Wayne J. Talamas  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

10560 NW 27 Street  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Doral FL 33172  
\_\_\_\_\_, FL \_\_\_\_\_

- (b) Wayne J. Talamas  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

3916 Palmarito Street  
**NEW** Registered Office Address:  
\_\_\_\_\_  
Coral Gables, FL 33134

FILED  
2016 OCT 17 PM 3:28  
TALLAHASSEE, FL 32301  
STATE OF FLORIDA  
CLERK OF THE SUPREME COURT

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Wayne Talamas Wayne Talamas  
Signature of a member or authorized representative of a member Printed or typed name of signee

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.

Wayne Talamas  
Signature of Registered Agent