

L17000047057

(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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2017 MAR 16 P 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

MAR 17 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Trini Build Performance 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:

Stefan A. Jagessar
Name of Person

Firm/Company

2241 NW 22 st, Unit 3
Address

Pompano, Florida 33069
City/State and Zip Code

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

For further information concerning this matter, please call:

Ameera Baksh
Name of Person

at (917) 250-2469
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

Trini Build Performance LLC

Trini Built Performance LLC

FILED

MAR 16 3:33 PM '07

CLERK OF DISTRICT COURT
STATE OF FLORIDA

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>
			☐ Add
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SECRETARY OF STATE
TAMM-SSFL-FLORIDA
JAN 10 2013
FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated _____,

Signature of a member or authorized representative of the organization

Stefan A. Jagessar

Type or printed name of signee

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2011 MAR 16 PM 3:34
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TALLAHASSEE, FLORIDA