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DIVISION OF CORPORATIONS

18 IIII 13 AM ID: 57

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COVER LETTER

	gistration Sec vision of Corp		•		
SUBJECT:	TRIPLE RRR AUTOMOTIVE LLC				
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Name of Limi	ted Liability Company		
The encloses	d Articles of A	amendment and fee(s) are subt	nitted for filing.		
Please return	all correspon	dence concerning this matter (to the following:		
		LAMISHA S. GRABAU			
			Name of Person	· · · · · · · · · · · · · · · · · · ·	
		TRIPLE RRR AUTOMOT	FIVE LLC		
			Firm/Company		
		652 CHESTWOOD CHA	SE DR		
			Address		
		ORANGE PARK, FLORI	DA 32065		
			City/State and Zip Code	.	
		RIPLERRRAUTOMOTIVE	-		
For further i	nformation co	E-mail address: (t neerning this matter, please ca	o be used for future annual report notifi	cation)	
	S. GRABAU	ncerning this matter, please ca	904 576-0299		
	Name of	Person	at () Area Code Daytime	Telephone Number	
Enclosed is:	a check for the	e following amount:			
\$25,001	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

TRIPLE RRR AUTOMOTIVE LL	.C		
(Name of the Limi	ted Liability Company a (A Florida Limited Liabi	s it now appears on our records hty Company)	<u>··)</u>
The Articles of Organization for this Limited L		re filed on 02/02/2018	and assigned
Florida document number L18000031380	·		
This amendment is submitted to amend the foll	lowing:		
A. If amending name, enter the new name o	of the limited liability	company here:	
The new name must be distinguishable and contain the	words "Limited Liability C	lompany," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:		
(Principal office address MUST BE A STREI	ET ADDRESS)		ø
	_ .		JUL TORRE
			OF TARE
Enter new mailing address, if applicable:	_		3 CNE B 200
Mailing address MAY BE A POST OFFICE	<u> (BOX)</u>		
	_		0, STATE
			7 %
B. If amending the registered agent and		e address on our records	enter the name of the nev
registered agent and/or the new registered o	ince address nere:		
Name of New Registered Agent:	LAMISHA S. GRA	ABAU	
New Registered Office Address:			
		Enter Florida street address	5
		Fla	orida
		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.

Changing Register d 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>	Address	Type of Action
PRES	LAMISHA GRABAU	652 CHESTWOOD CHASE DR	
		ORANGE PARK, FL 32065	■ Remove
			□ Change
MGR	LAMISHA S. GRABAU	652 CHESTWOOD CHASE DR	= Add
		ORANGE PARK, FL 32065	🗖 Remove
			Change
			
			Remove
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		07/10/201	8			
ffective date, if other the an effective date is listed, the d	ate must be specific	iling: : and cannot be prior	r to date of tiling or m	ore than 90 days aft	tional) er tiling.) Pursuan	it to 605.020
ote: If the date inserted in ocument's effective date on	this block does no the Department of	of meet the applic of State's records	rable statutory filin	g requirements, th	nis date will not	be listed a
e record specifies a de The 90th day after th	layed effectiv e record is file	e date, but no ed.	ot an effective t	ime, at 12:01	a.m. on the	earlier (
		2018				
ated	1	20.0				
		2018				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00