

LIF 0000 90077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400312389974

04/23/18--01024--021 \*\*25.00

FILED

2018 APR 23 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Carmen Burgos  
1248 S Alhambra Circle  
Coral Gables, FL 33146  
Cel: 786-554-9031

August 16, 2018

Florida Department of Revenue  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

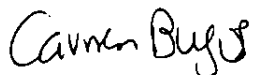
To Whom It May Concern:

Please amend the Articles of Incorporation of Trio Studio LLC as indicated on the attached form.

The Letter of Acknowledgment should be issued to:

Carmen Burgos  
1248 S Alhambra Circle  
Coral Gables, FL 33146  
Cell: 786-554-9031  
Email: cyburgos@comcast.net

Sincerely,

A handwritten signature in cursive script that reads "Carmen Burgos".

Carmen Burgos

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Trio Studio 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:

Carmen Burgos  
Name of Person

Trio Studio LLC  
Firm/Company

1248 S. Alhambra Cir.  
Address

Coral Gables, FL 33146  
City/State and Zip Code

cyburgos@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carmen Burgos at (786) 554-9031  
Name of Person 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

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

TRIO Studio 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 4/11/18 and assigned  
Florida document number 218000091077

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

2018 APR 23 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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>
P	Pablo X. Burgos	1248 S. Alhambra Ln. Coral Gables, FL 33146	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

**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 605.027 (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.

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

Dated 4/16, 2018

Amalendu B. Vengal  
Signature of a member of

Signature of a member or authorized representative of a member

Carmen Binaus

Typed or printed name of signee

2018 APR 23 PM 12:34  
STATE  
TALLAHASSEE, FLORIDA  
SECRETARY OF  
SUSAN E. MOSELEY  
not be listed as  
thereafter

FILED