

L19 0000 71229

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(Address)

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(City/State/Zip/Phone #)

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20 MAY 11 AM 9:45

MAY 29 2020  
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

Triplay ACZ, 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:

Alexander Clarke  
Name of Person

Firm/Company

16391 Viansa Way Unit 202  
Address

Naples, FL 34110  
City/State and Zip Code

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

For further information concerning this matter, please call:

Alexander Clarke  
Name of Person

at (805) 558-4278  
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 Address:**

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

20 MAY 11 AM 9:45

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

TRIPLEPLAY ACZ 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 03/13/2019 and assigned

Florida document number L19000071229

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:

Alexander Clarke

New Registered Office Address:

16391 Viansa Way #202

Enter Florida street address

Naples

City

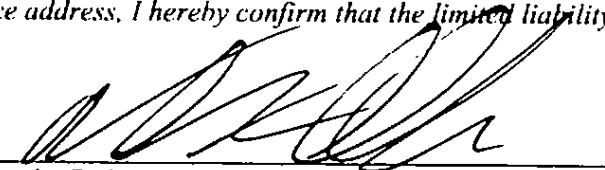
Florida

34110

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.*

  
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>                      |
|--------------|------------------------------------|----------------------------|--------------------------------------------|
| MGR          | GAYE LAMPERT                       | 16391 Vianesa Way Unit 202 | <input type="checkbox"/> Add               |
|              |                                    | Naples, FL 34110           | <input checked="" type="checkbox"/> Remove |
|              |                                    |                            | <input type="checkbox"/> Change            |
| MGR          | Alexander Clarke<br>ZANDER LAMPERT | 16391 Vianesa Way #202     | <input checked="" type="checkbox"/> Add    |
|              |                                    | Naples, FL 34110           | <input type="checkbox"/> Remove            |
|              |                                    |                            | <input type="checkbox"/> Change            |
|              |                                    |                            | <input type="checkbox"/> Add               |
|              |                                    |                            | <input type="checkbox"/> Remove            |
|              |                                    |                            | <input type="checkbox"/> Change            |
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|              |                                    |                            | <input type="checkbox"/> Remove            |
|              |                                    |                            | <input type="checkbox"/> Change            |

[illegible]

(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)

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 May 7, <sup>th</sup>, 2020

Signature of a member or authorized representative of a member

Alexander Clarke  
Typed or printed name of signer