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L2000015973

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S. YOUNG

2020 JUN 29 AM 6:47

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Tringx Home Improvement 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:

Maria Veronica V. Hale  
Name of Person

Tringx Home Improvement LLC  
Firm/Company

173 Tierra Verde Way  
Address

Bradenton, FL 34212  
City/State and Zip Code

Veronica Hale @ Tringx Home Improvement . on microsoft.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Veronica Hale at ( 904 ) 770-0407  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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

TRINIX HOME IMPROVEMENT 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 06/05/2020 and assigned  
Florida document number L2000015973

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 "L.L.C." 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:

Maria Veronica V. Hale

New Registered Office Address:

173 Tierra Verde Way  
Enter Florida street address

Bradenton  
City

, Florida

34212  
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.

Maria Veronica V. Hale

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>
<u>MGR</u>	<u>Maria Veronica V. Hale</u>	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		<u>(AR) Registered Agent (Same Address)</u>	<input checked="" type="checkbox"/> Change
<u>AR</u>	<u>Sean P. Hale</u>	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		<u>(AMBR) Authorized Member (Address same)</u>	<input checked="" type="checkbox"/> Change
<u>AR</u>	<u>Margaret R Hale</u>	_____	<input type="checkbox"/> Add
		<u>No longer with company</u>	<input checked="" 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.)**

Basically there will be Maria Veronica V. Hale  
as the Registered Agent and Sean P. Hale  
as an Authorized Member. These are the only  
two individuals that should be listed  
with the company.

**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 June 24, 2020.

Sean Hale

Signature of a member or authorized representative of a member

Sean P Hale

Typed or printed name of signee