

L 22 000 035 853

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

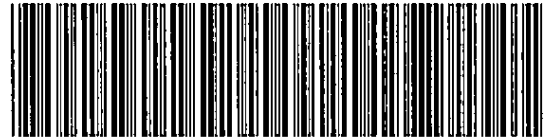
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200400352462

01/23/23--01005--023 \*\*25.00

2023 JAN 23 09:10:10

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Triple D's of NWF 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:

Kaysea Beaty  
Name of Person

Triple D's of NWF LLC  
Firm's Company

131 Jeff Dr.  
Address

Crestview FL 32536  
City, State and Zip Code

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

For further information concerning this matter, please call:

Kaysea Beaty at (901) 891-0755  
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 Address:**

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

2013 JUN 23 PM 10:20

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Triple D's of NWIF 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 NOV. 10, 2020 and assigned Florida document number L20000355853.

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)

131 Jeff Dr.

Crestview FL 32536

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:

131 Jeff Dr.

Enter only a valid street address

Crestview

City

Florida

32536

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>
AMBR	Dina Guerra Bailey	2725 Lakesilver Rd	<input type="checkbox"/> Add
		Crestview Fl. 32536	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Timothy Bailey	2725 Lakesilver Rd	<input type="checkbox"/> Add
		Crestview Fl. 32536	<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

2029 JUN 23 PM 10:57  
FBI - NEW YORK

2023-10-23

(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 January 15, 2023

Dana Gruen-Boiter  
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Dina Guerra-Bailey  
typed or printed name of s

Typed or printed name of signer