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11/22/22--01030--024 ++25.0

2022 NOV 22 PH 2: 16 SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

TO:	Registration Section
	Division of Corporations

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TRINITY TITLE, LLC

SUBJECT: _____

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

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Please return all correspondence concerning this matter to the following:

	Ernest A. Ricci			
	·	Name of Person		
	Trinity Title, LLC			
		Firm/Company		
	866 Park Ave, Suite 101			
		Address		
	Marco Island, FL 34145			
		City/State and Zip Code		
	courtfilings@boatmanricci.	com		
	E-mail address: (to be used for future annual report notif	lication)	
for further information c	oncerning this matter, please e	alf:		
Ernest A. Ricci		239 330-1494		
Name of Person		at () Area Code — Daytimo	e Telephone Number	
inclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		<u>Street Address:</u> Registration Sec	tion	
Division of Corporations		Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRINITY TITLE, LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organizatio	on for this Limited Liability C	Company were filed on	03/01/2021	_ and assigned
Florida document number	1,21000100046			

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 "LLC,"

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

		SEC	2022 N()
Enter new mailing address, if applicable:			ž
(Mailing address MAY BE A POST OFFICE BOX)		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	N 2
		NA XX	N
			PH H
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>enter_the nam</u>		w Pegister 5
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	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.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person bein or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Act
AMBR	BRANDON KARAS	866 PARK AVE SUITE 102B	🗆 Add
		MARCO ISLAND, FL 34145	≣Remove
			□Change
		·	
			🗆 Remove
		·	□Change
			🗆 Add
			[]Remove
			🗇 Change
·			🗅 Add
			□Change
			□∧dd
			🗆 Remove
			□Change
			🖾 Add

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

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	10/17/	2022		
E. Effective date, if other than th	ie date of filing:		(optional)	
(If an effective date is listed, the date m				
 <u>Note:</u> If the date inserted in this for document's effective date on the 			ing requirements, this date	will not be listed as the
assument serverive dure on the	expansion of once site	STEMP.		
If the record specifies a delayed effect	ive date, but not an effect	ive time, at 12:01 a.n	i, on the earlier of: (b) Th	ne 90th day after the
record is filed.				
November 2	2022			
Dated November 2		<u> </u>		

Signature of a member or authorized representative of a member

Ernest A. Ricci

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Typed or printed name of signee

Filing Fee: \$25.09