

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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H21000402435ABC

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

TRIPLE HORNE ARMORY LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

TRIPLE HORNE ARMORY 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 05/12/21 and assigned Florida document number L21000209117.

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:

2107 W Henry Ave

(Principal office address MUST BE A STREET ADDRESS)

Tampa FL 33603

Enter new mailing address, if applicable:

2107 W Henry Ave

(Mailing address MAY BE A POST OFFICE BOX)

Tampa FL 33603

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

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

FILED
2021 OCT 29 PM 12:53
TAMPA, FL 33603

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	Russell Horne	207 Sunshine Dr	<input type="checkbox"/> Add
		Lake Wales FL 33859	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Kenny Horne	207 Sunshine dr	<input type="checkbox"/> Add
		Lake Wales FL 33859	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Kenny Horne	801 Linnaen Terr NW	<input checked="" type="checkbox"/> Add
		Port Charlotte FL 33948	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Collin Horne	2107 W Henry Ave	<input type="checkbox"/> Add
		Tampa FL 33603	<input type="checkbox"/> Remove
			<input checked="" 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

[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.

Morgan Noble
Signature of a member or authorized representative

Morgan Noble

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OCT 29 PM 12:43
FBI - LOS ANGELES