## L21000350220

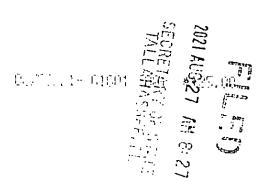
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to Fi	ling Officer:	

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Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Division of Cor	porations		
SUBJECT:	Triple garage LL	<u>C</u>	
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Arno	ldo a salinas	
		Name of Person	<u>_</u>
	Triple	garage LLC	
		Firm/Company	
	7106 l	NW 66TH ST	
		Address	
	Tamar	ac, Florida 33	321
	-	City/State and Zip Code	<del></del>
		92@aol.con to be used for future annual report not	ifugation)
			meation)
For further information c	oncerning this matter, please c	all:	
Arnoldo a salir	nas	ar ( <u>(954) 756-30</u>	020
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address:	action
Registration S Division of C		Registration Se Division of Co	
P.O. Box 632	7	The Centre of	l'allahassee
Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

## Triple garage 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 vi Florida document number <u>L21000350220</u>	were filed on _	08/03/2021		and as	ssigned	
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabil	lity company	<u>here</u> :				
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the	e designation "LLC"	or the abbrevi	iation "I	L.1C."	
Enter new principal offices address, if applicable:			:: 	202		
(Principal office address MUST BE A STREET ADDRESS)			ARE ACC	=	العنب	
· · · · · · · · · · · · · · · · · · ·			2.13	22	T III	
				7	\$ ************************************	
			25		WTTEN	
Enter new mailing address, if applicable:			100	- <del></del> -	-times	
(Muiling address MAY BE A POST OFFICE BOX)				<u>∵</u>		
· — — — — — — — — — — — — — — — — — — —			:17	7		
B. If amending the registered agent and/or registered office ac agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	ddress on our	records, <u>enter</u>	the name of	the no	ew registered	
	Enter F	lorida street address				
	, Florida					
	City		Z	ip Code	,	
New Registered Agent's Signature, if changing Registered Agent:						
I hereby accept the appointment as registered agent and agree			ther garee	a aan	anda anida dan	

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>	Address	Type of Action
Ambr	Arnoldo a salinas	7106 nw 66 street tamarac, fl 3332	21 □Add
			<b>⊠</b> Remove
			□Change
Ambr	Jose c mendez	403 sw 65th ave, margate fl. 3306	8 □Add
			<b>⊠</b> Remove
		<u> </u>	□Change
			Add T
			Add G 27 Remove 8 Change
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Note: If the o	te, if other than thate is listed, the date me date inserted in this based on the I	block does not	nd cannot be prior	able statutory	or more than 90 filing requiren	(optiona days after filir rents, this da	l) ng.) Purs te will	uant to 6 not be 1	605,0207 isted as
e record speci rd is filed.	fies a delayed effecti	ive date, but n	ot an effective t	ime, at 12:01 a	.m. on the earl	ier of: (b)	The 90t	h day at	fter the
	August 1	8	, 2021	12	2				
Dated				~ W \	<b>A</b> .				
Dated		Signature of	a member or auth	orized represent	ative of a memb	ਖ			