K21000471263

(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
_
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500380069255

01/26/22--01014--013 **25.00



A. BUTLER FEB - 4 2022

COVER LETTER

TO: Registration Division of C					
SUBJECT.	TRP ENTE	RTAINMENT LLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
		DANIEL ROJAS			
		Name of Person			
	TR	Firm/Company 9570 BISCAYNE PARK Address			
	В	BOCA RATON, FL 33428 City/State and Zip Code			
					
	•	usictrumpet@hotmail.com to be used for future annual report noti	treation)		
For further information	n concerning this matter, please c	·	(incation)		
DANIEL R	OJAS	561 409-6324			
Nam	e of Person	at () Area Code Daytim	e Telephone Number		
Enclosed is a check fo	r 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 Add		Street Address:	·		
Registration Section Division of Corporations		Registration Se Division of Cor			
P.O. Box 6327		The Centre of T	•		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ERTAINMENT LLC	40	
(Name of the Limi	ted Liability Company as it now (A Florida Limited Liability Con	/ appears on our records.)	
	(A Florida Ellinica Elability Coll		
The Articles of Organization for this Limited I	iability Company were filed	: C1	gned
<u> </u>	y company were mee		<i>B.</i> ****
Florida document number <u>L21000471263</u>			
This amendment is submitted to amend the following	owing:		
A. If amending name, <u>enter the new name c</u>	f the limited liability comp	any here:	
The new name must be distinguishable and contain the	words "Limited Liability Company	y," the designation "LLC" or the abbreviation "L.I	C."
Enter new principal offices address, if applic	cable:		
Principal office address MUST BE A STREI	ET ADDRESS)		
			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	BOX)		
			
			_
B. If amending the registered agent and/or		our records, <u>enter the name of the new</u>	registe
gent and/or the new registered office addre	ss nere:		
Name of New Registered Agent:	DANIEL ROJAS		
	OEZO DICCAVAIE DA	A DIZ	
New Registered Office Address:	9570 BISCAYNE PA		
	E)	nter Florida street address	
	BOCA RATON	, Florida 33428	
	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

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>	Name	Address	Type of Action
MGR/AMBR	DANIEL ROJAS DL	9570 BISCAYNE PARK, BOCA RATON, FL 33428	&Add
			□Remove
			□Change
AMBR	JUAN G DIAZ	9570 BISCAYNE PARK, BOCA RATON, FL 33428	□Add
			⊠ Remove
			□Change
AMBR	DIANA SOLER	9570 BISCAYNE PARK, BOCA RATON, FL 33428	□Add
			⊠Remove
			□Change
			□Add
			Remove
			🗆 Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
 	
<u></u>	
	
	
Note: If the date	optional) s listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a tive date on the Department of State's records.
record specifies I is filed.	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	January 20 , 2022
	Signature of a marshur or authorist fragmentation of a marshur of a marshur or authorist fragment of a marshur or a mars
	Signature of a member or authorized representative of a member