## L22000465908

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## **COVER LETTER**

TO: Registration So Division of Cou			••
Trinity Foo	cus Group, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Tonia M. Oldham		
		Name of Person	
	Trinity Focus Group, LLC	;	
		Firm/Company	
	5147 Deeson Pointe Court	ı	202
		Address	2022 DEC 3-2014 1:
	Lakeland, FL 33805		C 21
		City/State and Zip Code	1:
	ctoldham6@gmail.com		
For further information of	E-mail address: ( concerning this matter, please c	to be used for future annual report no	tification)
Charles A. Oldham	oncerning and matter, preuse e	863 999-2658	. ,
	of Person	at ()	me Telephone Number
ivanic C	i i cison	Alea Code Daya	ine relephone (value)
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	S30.00 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 Addre		Street Address:	
Registration : Division of C		Registration S Division of Co	
P.O. Box 632		The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Trinity Focus Group, LLC			
(Name of the Limited	Liability Company as it now appears on Florida Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liab Florida document number L22000465908	oility Company were filed on 31 Octo	ober 2022	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company here:		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the design	ation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:		12 月 1
(Principal office address MUST BE A STREET	ADDRESS)	·	
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Puter non-colling address if annihilation			The state of the s
Enter new mailing address, if applicable:			- <del> </del>
<u>(Mailing address MAY BE A POST OFFICE BO</u>	<u></u>	<u> </u>	<u> </u>
B. If amending the registered agent and/or reg agent and/or the new registered office address	•	ds, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:	Tonia M. Oldham		
New Registered Office Address:	5147 Deeson Pointe Court		
	Enter Florida s	treet address	· ·
	Lakeland	. Florida	33805
	City	, . 101104 _	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.

Jonia m. Qlaham

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
AMBR	Charles A. Oldham	5147 Deeson Pointe Court	■ Add
		Lakeland, FL 33805	□ Remove
			□Change
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			□Remove
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ective date, if other than the date of filing:		_ (optional)
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cument's effective date on the Department of State's record		
and an officer data and officer data has been as an officer.	or 12:01 and on the analis	on of the The Oosh day of an the
ecord specifies a delayed effective date, but not an effective is filed.	ime, at 12:01 a.m. on the earne	er of: (b) The your day after th
17 Daniel 1		
17 December . 2022	·	
Jones no	QUUL cum- orized representative of a member	

Filing Fee: \$25.00