

L230000035346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

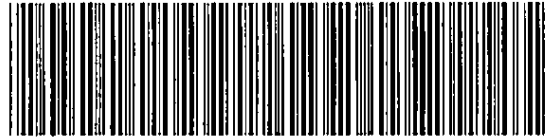
(Business Entity Name)

(Document Number)

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JANUARY 18, 2024

COVER LETTER

**TO: Registration Section
Division of Corporations**

Triple H, LLC

SUBJECT: _____
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Michael J. Henry, Esq.

Name of Person

Dunlap & Shipman, P.A.

Firm/Company

2063 S. County Hwy. 395

Address

Santa Rosa Beach, FL 32459

City/State and Zip Code

michael@dunlapshipman.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael J. Henry

850

231-3315

Name of Person at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Triple H, 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 01/25/2023 and assigned
Florida document number 1.23000035346.

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:

(Principal office address MUST BE A STREET ADDRESS)

5728 Skidaway Road

Savannah, GA 31406

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5728 Skidaway Road

Savannah, GA 31406

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:

Dunlap & Shipman, P.A.

New Registered Office Address:

2063 S. County Hwy. 395

Enter Florida street address

Santa Rosa Beach

Florida

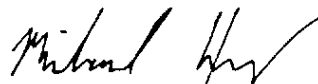
32459

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Harry Halif	415 Harrison Ave.	<input type="checkbox"/> Add
		San Antonio, TX 78209	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tracey Tollison	5728 Skidaway Road	<input checked="" type="checkbox"/> Add
		Savannah, GA 31406	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	James Robert Hughes, Jr.	5728 Skidaway Road	<input checked="" type="checkbox"/> Add
		Savannah, GA 31406	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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(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)

Dated December 12, 2023

Signature of a member or authorized representative of a member

Typed or printed name of signee