

L17000190933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

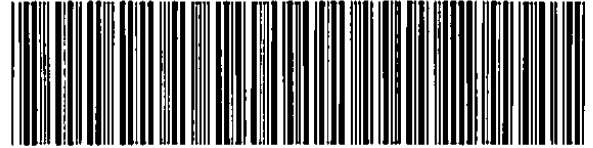
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/18/19--01019--006 **38.00

19 JUN 19 AM 9:18
CLERK OF SUPERIOR COURT

Amend

JUN 27 2019
D CUSHING

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ABSOLUTE SOLUTIONS SERVICES LLC

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:

ENA MARTINEZ

Name of Person

ABSOLUTE SOLUTIONS SERVICES LLC

Firm/Company

18872 NW 63 CT CIR

Address

HIALEAH, FL 33015

City/State and Zip Code

admabsolutesolutionservices@gmail.com

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

For further information concerning this matter, please call:

ENA MARTINEZ

305 984-2454
at ()

Name of Person

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

19 JUL 19 11:19:19
Tallahassee, FL

**TO
ARTICLES OF ORGANIZATION
OF**

ABSOLUTE SOLUTIONS SERVICES 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 06/12/2019 and assigned
Florida document number L17000190933.

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)

18872 NW 63 CT CIR

HIALEAH, FL 33015

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

18872 NW 63 CT CIR

HIALEAH, FL 33015

B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:

Name of New Registered Agent:

ENA MARTINEZ

New Registered Office Address:

18872 NW 63 CT CIR

Enter Florida street address

HIALEAH

City

Florida 33015

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 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 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

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	ENA MARTINEZ	18872 NW 63 CT CIR HIALEAH, FL 33015	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	IBRAIMO ZAINADINE		<input type="checkbox"/> Add
		3145 GRAND AVE #305 PINELLAS PARK, FL 33782	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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06/12/2019

E. Effective date, if other than the date of filing: _____ (optional)

(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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.

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.

Dated JUNE 12th, 2019

✓



Signature of a member or authorized representative of a member

ENA MARTINEZ

Typed or printed name of signer