

-353661

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COVER LETTER

	ofessional Disposal Service and	l More, LLC			
SUBJECT:	Name of Lim	ited Liability Company	<u>-</u>		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Melanie Kirksy				
		Name of Person			
		Firm/Company			
Firm/Company 4071 L.B. Mcleod Rd., Ste. D, PMB 90 Address Orlando, FL 32811 City/State and Zip Code					
	Orlando, FL 32811 City/State and Zip Code				
	apds92321@gmail.com E-mail address: (to be used for future annual report notif	lication)		
For further information c	oncerning this matter, please c	all:			
Melanie Kirksy		630 998-6562 at ()			
Name o	f Person	Area Code Daytime	e 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 Address:

TO:

Registration Section Division of Corporations

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

FILED

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Austin's Professional Disposal Service and More, LLC The Articles of Organization for this Limited Liability Company were filed on August 26, 2021 and assigned Florida document number L210000383661 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 "LLC." 4071 L.B. Meleod Rd. Enter new principal offices address, if applicable: Ste. D, PMB 90 (Principal office address MUST BE A STREET ADDRESS) Orlando, FL 32811 4071 L.B. Mcleod Rd. Enter new mailing address, if applicable: Ste. D, PMB 90 (Mailing address MAY BE A POST OFFICE BOX) Orlando, FL 32811 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: Melanie Kirksy Name of New Registered Agent: 4071 L.B. Mcleod Rd., Ste. D, PMB 90 New Registered Office Address: Enter Florida street address Orlando

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.

City

If Changing Registered Agent, Signature of New Registered Agent

it analming without of Person so anthorized to makings, <u>enter the title name and address of buch person to any added</u> of removed from our records:

ARR - Manager

CMBR = Authorized Member

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	Melanic Kirksy owns 51% of Austin's Professional Disposal Service and More, LLC	
,	Costell Austin owns 49% of Austin's Professional Disposal Service and More, LLC	
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Fffect	ive date, if other than the date of filing: (optional)	
(If an ef Note:	lective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listenent's effective date on the Department of State's records.	
ne recon	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after led.	r the
	Cost Many Signature of a member or authorized representative of a member	
Dated		

Typed or printed name of signee