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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

Fax Number :

: (850)617-6383

⊃From: .' Account Name

To:

Account Name : OGBESA SERVICES CORP

Account Number : I20200000191 Phone : (786)307-5694 Fax Number : (786)833-9331

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PHOENIX PROPERTY MULTISERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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COVER LETTER

TO: Registration Se Division of Cor		
	PROPERTY MULTISERVICES LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	MADAY E GARCIA	
	Name of Person	
	PHOENIX PROPERTY MULTISERVICES LLC	
	Firm/Company	
	3935 NW 193 STREET	
	Address	
	MIAMI GARDENS, FL 33055	
	City/State and Zip Code	
	phoenixmanagement17@gmail.com	
	E-mail address: (to be used for future annual report notification)	
For further information of	concerning this matter, please call:	
MADAY E GARCIA	786 307-5694 at ()	
Name o	of Person Area Code Daytime Telephone Number	
Enclosed is a check for t	the following amount:	
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Mailing Address Registration of C	Section Registration Section Corporations Division of Corporations	
P.O. Box 632		
Tallahassee.	Tallahassee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

2025 AUG -8 AM 8: 32

AND SET ENDER

PHOENIX PROPERTY MULTISERVICES LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on and assigned and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	ulity company here:	
PHOENIX TRAILER MULTISERVICES LLC		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	9900 NW 80 AVENUE	
(Principal office address MUST BE A STREET ADDRESS)	BAY 4I	
	HIALEAH, FL 33016	
Enter new mailing address, if applicable:	3935 NW 193 STREET	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI GARDENS, FL 33055	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registers	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	City Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and age provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	c performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

Θ

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

From: WWW.FAX.PLUS (Maday Garcia)

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GEANYS GARCIA	3935 NW 193 STREET	□ Add
		MIAMI GARDENS, FL 33055	□Remove
			€Change
			□Add
			□Remove
			①Change
 -			□Add
			□Remove
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Note:	tive date, if other than the date of filing: [Coptional] [Coptional]	05.0207 (3 \(\)b) sted as the
cord is f		er the
Dated	AUGUST 7 2025	
	Signature of antember of authorized representative of a member	
	MADAY E GARCIA	
	Typed or printed name of signee	