

L230000082298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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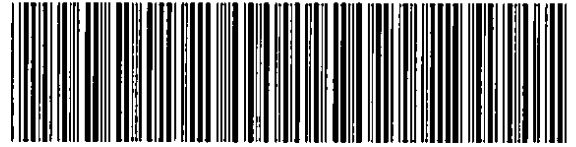
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SENRRA SPRINKLER'S PROFESSIONAL REPAIR 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:

DAVID RIVERA

Name of Person

DR ACCOUNTING & MORE LLC

Firm/Company

914 WILSON RIDGE DR APT 1725

Address

ORLANDO FLORIDA 32818

City/State and Zip Code

dramore16@gmail.com

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

For further information concerning this matter, please call:

DAVID RIVERA

407 952-4190

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 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**

SENKRA SPRINKLER'S PROFESSIONAL REPAIR 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 02/14/2023 and assigned
Florida document number L23000082298.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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SECRETARY OF STATE
TALLAHASSEE, FL

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:

New Registered Office Address:

Enter Florida street address

City, Florida 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

[illegible]

[illegible]

(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)

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.

2023

Dail R. W.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00



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Detail by Entity Name

Florida Limited Liability Company

SENRRA SPRINKLER'S PROFESSIONAL REPAIR LLC

Filing Information

Document Number L23000082298

FEI/EIN Number NONE

Date Filed 02/14/2023

Effective Date 02/14/2023

State FL

Status ACTIVE

Principal Address

60 E PALMETTO ST
WINTER GARDEN, FL 34787

Mailing Address

60 E PALMETTO ST
WINTER GARDEN, FL 34787

Registered Agent Name & Address

DR ACCOUNTING & MORE LLC
914 WILSON RIDGE DR
1725
ORLANDO, FL 32818

Authorized Person(s) Detail

Name & Address

Title MGR

SENRRA CRUZ, CHRISTIAN M
60 E PALMETTO ST
WINTER GARDEN, FL 34787

Annual Reports

No Annual Reports Filed

Document Images

02/14/2023 -- Florida Limited Liability [View image in PDF format](#)