

# L23000251074

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

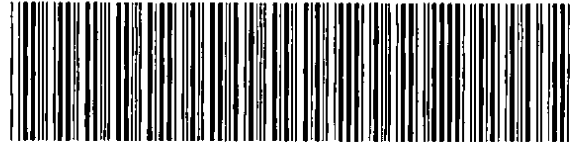
(Business Entity Name)

(Document Number)

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JUN 26 2023  
CLERK OF STATE  
TALLAHASSEE, FL  
PH 7:09

R. HUNT  
06/26/23

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: AJH PRIORITY SERVICE 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:

Shonnikkia Francois  
Name of Person  
AJH PRIORITY SERVICE LLC  
Firm/Company  
4661 NW 10TH CT E202  
Address  
PLANTATION, FL 33313  
City/State and Zip Code  
ajhpriorityservice@gmx.com  
E-mail address: (to be used for future annual report notification)

RECEIVED  
STATE OF FLORIDA  
TALLAHASSEE, FL  
2003 JUN 26 PM 7:09

For further information concerning this matter, please call:

Shonnikkia Francois at (            ) 9544519978-321-341-9541  
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**

AJH PRIORITY SERVICE 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 05/22/2023 and assigned Florida document number L23000251074.

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)

2023  
MAY 26 PM 7:09  
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TAMPA FL  
FILED

**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: Shonnikia Francois

New Registered Office Address: 4661 NW 10TH CT E202  
*Enter Florida street address*

PLANTATION, Florida 33313  
*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.*

 Shonnikia Francois  
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	Shonnikkia Francois	4661 NW 10TH CT E202	<input checked="" type="checkbox"/> Add
		PLANTATION, FL 33313	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Shonkkkia Francois	4661 NW 10TH CT E202	<input type="checkbox"/> Add
		PLANTATION, FL 33313	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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 DIVISION OF REVENUE  
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