

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200417435092

11.17.27 -01.11--016 **13.00

2023 CCT 1 7 PR 4: 02

COVER LETTER

TO:	Registration Se Division of Co			
oun re		ISERVICIOS LLC		
SUBJEC	JI:	Name of Lim	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		ULISES ALFREDO ZELI	EDON MARTINEZ	
			Name of Person	
		ULISES ZELEDON / ZM	MULTISERVICIOS LLC	
			Firm/Company	
		5605 NW 7 TH ST APT A	.317	
			Address	
		MIAMI/FL 33126		202 SEI T
			City/State and Zip Code	
		uliseszeledon19@gmail.com		- -
			to be used for future annual report noti	rication)
For furth	er information c	oncerning this matter, please c	all:	2027 OCT 7 PH 4: 02 SECRED 17 PH 4: 02
	Name o	f Person	at ()	c Telephone Number
Enclosed	l is a check for th	he 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 Addres		Street Address:	vtion
	Registration S Division of C		Registration Sec Division of Cor	

P.O. Box 6327

Tallahassee, FL 32314

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

ZM MULTISERVICIOS LLC				
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appears on our re Liability Company)	cords.)	
The Articles of Organization for this Limited I	_iability Company	y were filed on		and assigned
lorida document number L.23000356033				
his amendment is submitted to amend the fol	lowing:			
. If amending name, enter the new name of	of the limited lial	bility company here:		
M REMODELING & MAINTENANCE LLC				
ne new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation "	LLC" or the abbrev	riation "L.L.C."
nter new principal offices address, if appli	cable:	5605 NW 7 TH ST APT A	317	
rincipal office address MUST BE A STRE	ET ADDRESS)			
nter new mailing address, if applicable: Sailing address MAY BE A POST OFFICE	BOX)	5605 NW 7 TH ST APT A		2023 DCT
		 		<u></u>
. If amending the registered agent and/or gent and/or the new registered office addre		address on our records, <u>en</u>	ter the name of	the new registe
Name of New Registered Agent:	ULISES ALF	REDO ZELEDON MARTINE	Z	
New Registered Office Address:	5605 NW 7 TI	H ST APT A317		
		Enter Florida street ad	dress	
	MIAMI		Florida 33126	
		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.

	of New Registered Age	

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>	Address	Type of Action
AMB R	ULISES ALFREDO ZELEDON M	5605 NW 7 TH ST APT A317	= Add
			□Remove
			□ Change
			□Add
			Remove
			□Change
		- , 	35.5 C. Add
			Remove
			Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	
			□ Change
			□Add
		 	□Remove
			Change
			□ Add
			□ Change

		· · ·	
		 	· · · · · · · · · · · · · · · · · · ·
			
			
			
		<u> </u>	20
		TORE	2306
			-
			7
			
		177	8
		···	
07/28/2023			
Tective date, if other than the date of filing:	date of filing or more than 90 c	_ (optional) lays after filing.) Pu	rsuant to 605.020
ote: If the date inserted in this block does not meet the applicable beament's effective date on the Department of State's records.	le statutory filing requirement	ents, this date wil	l not be listed a
·			
record specifies a delayed effective date, but not an effective time is filed.	e, at 12:01 a.m. on the earli	er of: (b) The 90)th day after the
07/28/2023			
	/ •		
Signature of a member or authority	+n		

Filing Fee: \$25.00