

L20 000032891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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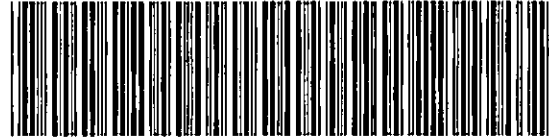
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FL

10/30/20

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: AAOO SERVICES, 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:

JAMES MICHAEL KNIGHTEN

Name of Person

Firm/Company

9247 HAWKS HAVEN CT.

Address

JACKSONVILLE, FL 32222

City/State and Zip Code

turf90772@aol.com

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

For further information concerning this matter, please call:

JAMES MICHAEL KNIGHTEN

Name of Person

at (904)

Area Code

909.7774

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**

AAOO SERVICES, 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 JANUARY 27, 2020 and assigned
Florida document number L20000032891.

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)

9247 HAWKS HAVEN COURT

JACKSONVILLE, FL 32222

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME AS NEW PRINCIPAL OFFICE ADDRESS

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:

JAMES MICHAEL KNIGHTEN

New Registered Office Address:

9247 HAWKS HAVEN COURT

Enter Florida street address

JACKSONVILLE

City

, Florida 32222

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.

CLERK OF STATE
TALLAHASSEE, FL

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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	James Michael Knighten	9247 Hawks Haven Court	<input checked="" type="checkbox"/> Add
		Jacksonville, FL 32222	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Madeleine T. Hawkinson	844 River Road	<input type="checkbox"/> Add
		Orange Park, FL 32073	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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2020 SEP 24 PM 4:14
SECRETARY OF STATE
TALLAHASSEE, FL

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2020 SEP 24 PM 4:14
CLERK OF DISTRICT COURT
TALLAHASSEE, FL

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 9-22, 2020

Signature of a member or authorized representative of a member

JAMES MICHAEL KNIGHTEN, MEMBER

Typed or printed name of signee

Filing Fee: \$25.00