L04000034691

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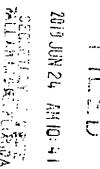
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COVER LETTER

	gistration Sec ision of Corp						
SUBJECT:		ERVICES, LLC					
SOBJECT.		Name of Lim	ited Liability Company				
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspor	ndence concerning this matter	to the following:				
		LUIS C. RODRIGUEZ-RI	IVERA				
			Name of Person				
		D'NOVO SERVICE, LLC					
			Firm/Company				
			Address	<u></u>			
		MAITLAND, FL 32751					
			City/State and Zip Code				
		LUIS@COMELCOSERVI					
		E-mail address: (to be used for future annual report notifi	cation)			
For further in	nformation co	ncerning this matter, please co	all:				
LUIS C. RODRIGUEZ-RIVERA			407 310-7140 at ()				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclosed is a	check for the	e following amount:					
□ \$25.00 F	iling 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

D, NOVO SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

TI 4 .: 1 . 60	TUNE 20	2019
The Articles of Organization for this Limited L Florida document number <u>L04000034691</u>	hability Company were filed on 3011220.	and assigned
Florida document number	·	
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name of	of the limited liability company here:	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	
		F. 22
B. If amending the registered agent and	or registered office address on our re	ecords, enter the name of the new
registered agent and/or the new registered o	ffice address here:	47
Name of New Registered Agent:	JESSE GONZALEZ	
New Registered Office Address:		THE STATE OF THE S
New Registered Office Address.	Enter Florida street	uddress
		, Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:	
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi being filed to merely reflect a change in the company has been notified in writing of this	er and complete performance of my duti stered agent as provided for in Chapter registered office address, I hereby confit	ies, and I am familiar with and 605, F.S. Or, if this document is

Page Yof 3

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>	Type of Action
AMBR	JESSE GONZALEZ	125 SWOOPE AVE. SUITE 104 MAITLAND, FL 32751	
			Remove
			Change
AMBR	LUIS RODRIGUEZ	2910 GRAYTON ST. DELTONA, FL 32738	
			■ Remove
			☐ Change
AMBR	ANDREW CARPENTER	721 CLOVERLEAF BLVD. DELTONA, FL 32725	Add
			■ Remove
			ZD CHange THE
			Aad
			Remove
			☐ Change
			Add
			☐ Remove
			Change
.			Add
			□ Remove
			□ Change

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effective date is listed, the date e: If the date inserted in the	is block does not m	eet the applica	o date of filing of ble statutory fi	r more than 90 da ling requiremen	iys after filir ots, this da	ig.) Pursu te will no	ant 'to′ 605,0; ot be⊀listed
ument's effective date on th	e Department of S	tate's records.) -	_
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record specifies a dela he 90th day after the	record is filed.	ate, but not	an errectiv	e time, at 12	2:01 a.m	. on th	e earlier
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JUNE 20 ed		2019	_{//				
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Page 3 of 3

Filing Fee: \$25.00