

LO4 0000 35330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

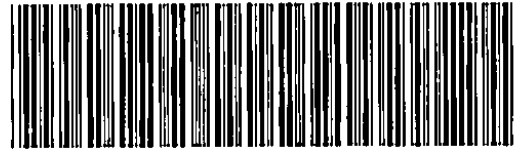
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/11/19-01/17/19

2019 SEP 18 AM 11:33

C GOLDEN

OCT - 2 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Royal YARD 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:

Luis Ramirez

Name of Person

BEST Financial Services LLC Inc

Firm/Company

8800 University Drwy Suite C-2

Address

Fort Smith FL 32514

City/State and Zip Code

Luis@BESTFinancialServices.com

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

For further information concerning this matter, please call:

Luis Ramirez

Name of Person

at 810

Area Code

572 4846

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/COURIER ADDRESS:

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

TO
ARTICLES OF ORGANIZATION
OF

Royal Yard Services LLC

2019 SEP 18

(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 11/03/2005 and as
Florida document number LO4000035930.

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Christoph Zeller

494 Postside Dr

Pensacola FL 32507

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

494 Postside Dr

Pensacola FL 32507

**B. If amending the registered agent and/or registered office address on our records, enter the name of
registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Christoph Zeller

New Registered Office Address:

494 Postside Dr

Enter Florida street address

Pensacola

City

Florida

32507

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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

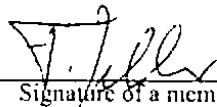
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type</u>
<u>MGR</u>	<u>Christoph Zeller</u>	<u>494 Riverside Dr</u> <u>DeWanna FL 32507</u>	<input checked="" type="checkbox"/> Add
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			<input type="checkbox"/> Change

E. Effective date, if other than the date of filing: 9-9-19 (optional)

(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
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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earliest of:
(b) The 90th day after the record is filed.

Dated 9-9 2019.



Signature of a member or authorized representative of a member

FERDINAND ZELLER.

Typed or printed name of signee