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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JUL - 2 2013

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Amy's 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:

Michael A Watson

Name of Person

Amy's Services LLC

Firm/Company

P.O. Box 9735

Address

Tampa, Florida 33674-9735

City/State and Zip Code

amyservicesllc@gmail.com

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

For further information concerning this matter, please call:

Michael Yingling

Name of Person

813 404-3521

at ()

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Amy's 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 06/01/2004 and assigned
Florida document number L04000041191

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 end with 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)

6744 Angus Valley Drive

Wesley Chapel, FL 33544-3243

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 9735

Tampa, FL 33674-9735

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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:

Michael A Watson

New Registered Office Address:

6744 Angus Valley Drive

Enter Florida street address

Wesley Chapel

City

, Florida 33544-3243

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 608, 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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

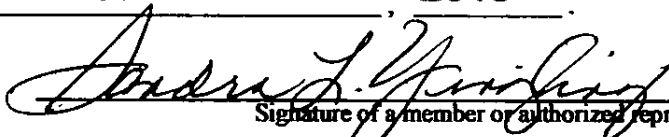
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Bradley A Yingling	3130 Lake Saxon Drive	<input type="checkbox"/> Add
		Land O Lakes, FL 34639	<input checked="" type="checkbox"/> Remove
MGRM	Michael A Watson	6744 Angus Valley Drive	<input checked="" type="checkbox"/> Add
		Wesley Chapel, FL 33544	<input type="checkbox"/> Remove
AsstSecr	Sandra L Yingling	3130 Lake Saxon Drive	<input type="checkbox"/> Add
		Land O Lakes, FL 34639	<input checked="" type="checkbox"/> Remove
MEMB	Michael I Yingling	3130 Lake Saxon Drive	<input checked="" type="checkbox"/> Add
		Land O Lakes, FL 34639	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated June 25th, 2013



Signature of a member or authorized representative of a member

Sandra L Yingling

Typed or printed name of signee

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Filing Fee: \$25.00

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