

LD4000058601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

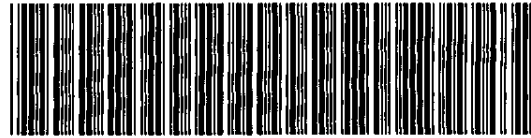
(Business Entity Name)

(Document Number)

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12/20/10--01001--012 \*\*11.25

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TALLAHASSEE, FLORIDA

D. BRUCE

DEC 17 2010

EXAMINER

*Wrong form*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 15, 2010

JOSE RUIZ  
5314 SW 164TH CT  
MIAMI, FL 33185

SUBJECT: RAPID APPRAISAL SERVICES, LLC  
Ref. Number: L04000058601

We have received your document for RAPID APPRAISAL SERVICES, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is a balance due of \$11.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 810A00026725

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TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RAPID APPRAISAL 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:

MIRNA RUIZ

Name of Person

RAPID APPRAISAL SERVICES, LLC

Firm/Company

14381 SW 19TH TERR

Address

MIAMI, FL 33175

City/State and Zip Code

jose\_ruiz17@yahoo.com

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

For further information concerning this matter, please call:

Jose Ruiz

Name of Person

at ( 305 )

801-8648

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

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

**RAPID APPRAISAL 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 08/09/2004 and assigned  
Florida document number L04000058601.

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)

14381 SW 19TH TERR

MIAMI, FL 33175

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 940081

MIAMI, FL 33194

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TALLAHASSEE, FLORIDA

**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:

MIRNA RUIZ

New Registered Office Address:

14381 SW 19TH TERR

*Enter Florida street address*

MIAMI

Florida

33175

*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 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

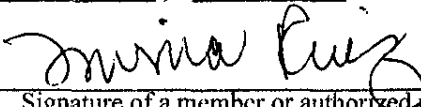
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Computer Solutions for less	5314 SW 164TH CT MIAMI, FL 33185	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	MIRNA RUIZ	14381 SW 19TH TERR MIAMI, FL 33175	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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 ALABAMA SECRETARY OF STATE  
 ALABAMA SECRETARY OF STATE  
 ALABAMA SECRETARY OF STATE

Dated \_\_\_\_\_

x 

\_\_\_\_\_  
 Signature of a member or authorized representative of a member

MIRNA RUIZ  
 \_\_\_\_\_  
 Typed or printed name of signee