

Los Angeles 7

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

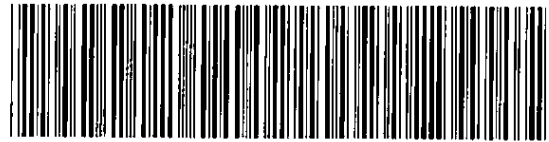
(Business Entity Name)

(Document Number)

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**TO: Registration Section
Division of Corporations
42.318 OPS LLC**

SUBJECT: _____
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 AVERBUCH

Name of Person

Firm/Company

8437 TUTTLE AVE #407

Address

SARASOTA, FL 34243

City/State and Zip Code

m.averbuch@yahoo.com

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

For further information concerning this matter, please call:

MICHAEL AVERBUCH

941 404-9928

Name of Person 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

42.318 OPS LLC

The Articles of Organization for this Limited Liability Company were filed on 02/14/2005 and assigned Florida document number 1.05000015167.


If Changing Registered Agent, Signature of New Registered Agent

07:00

(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 605.0207 (3)(b)

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

August 13 2024
Dated _____



Signature of a member or authorized representative of a member

MICHAEL AVERBUCH

Typed or printed name of signee