## L0600042483

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## **COVER LETTER**

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**Registration Section** 

Division of Corporations						
CHRIST	A&A Services Li	mited Liability Compar	٦V			
SUBJECT:		ted Liability Company	<u>.,                                     </u>			
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.				
Please return all corres	pondence concerning this matter	to the following:				
		Stanley U. Hunt				
	Name of Person					
	A&A Services, Limited Liability Company					
	Firm/Company					
	15	1547 Peter's Creek Road				
	Address					
	Green Cove Springs, FL 32043					
	City/State and Zip Code					
		accountingservicesaa.com to be used for future annual report not				
For further information	concerning this matter, please of					
	· ·					
Stanley U. Hunt Name of Person		at ( 904 )	me Telephone Number			
· · ·	z (i) i erson	, we esse a pay				
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 enclose	\$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



A&A Services, Limited Liability Company

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

The Articles of Organization for	or this Limited Liability Comp	oany were filed on	4/24/2006	and assigned
Florida document number	L06000042483			
This amendment is submitted t	o amend the following:			
A. If amending name, enter	the new name of the limited	liability company her	<u>e</u> :	
The new name must be distinguing.	shable and end with the words "	Limited Liability Compa	any," the designation "	LLC" or the abbreviation
Enter new principal offices a	ddress, if applicable:			
(Principal office address MUS	ST BE A STREET ADDRES	<u>S)</u>	<del> </del>	
Enter new mailing address, i	f applicable:			***************************************
(Mailing address MAY BE A	POST OFFICE BOX)			
B. If amending the registered agent and/or the n		d office address on o	our records, <u>enter</u>	
Name of New Regist	ered Agent:			<del></del>
New Registered Offi	ce Address:	<u>En</u>	ter Florida street add	Iress
		, Florida		
	<del></del>	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 Type of Action **Address** <u>Title</u> <u>Name</u> □ Add Remove Remove ☐ Add ☐ Remove Add Remove ∐Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Article 3: Should be changed as follows: Purpose: This company is organized for the purpose of conducting any and all legal transactions. September 17 2009 Dated Signature of a member or authorized representative of a member Stanley U. Hunt Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00