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SECRETARY OF STATE
AND ASSEFT FLORIDA

T. CLINE

MAY - 9 2008

**EXAMINER** 

## **COVER LETTER**

Division of Corporations
SUBJECT: Quick & EARY 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:
Giovanne Snider (Name of Person)
Quice & Eary Symposs LLC (Firm/Company)
5371 W. MacNab Rd
(Address)
North Loudredge A. 33068 Fr. 3
(City/State and Zip Code)
(City/State and Zip Code)  A SEC TRE TARY  For further information concerning this matter, please call: 100 100 100 100 100 100 100 100 100 10
(Name of Person) at (954) 478-2877 TO
(Name of Person)  at (954) 478-2877  (Area Code & Daytime Telephone Number)  ORDER  OR
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

### MAILING ADDRESS:

TO:

**Registration Section** 

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

	& Easy Service:	, we
( <u>Name of the Limited Li</u> (A Fl	iability Company as it now appears on o lorida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liab		and assigned
Florida document number L 080000   3	<u>0\Z</u> .	
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the $\mathcal{O}/\mathcal{A}$	_	
The new name must be distinguishable and end with t "L.L.C."  B. If amending the registered agent and/or		
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our re <u>ce address here</u> :	
		AHIO: 36 OF STATE FLORID
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	(Enter F	lorida street address)
		, Florida
	(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 **Title** <u>Name</u> <u>Address</u> **Type of Action** Add Remove ☐ Add Remove ☐ Add Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) illed outthis amendment because use need to change he preentage of the stores/participartion asolo 75% under Giovanne Snider and 2520 Dated North Signature of a member or authorized/representative of a member Cons Coste Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00