L08000000214

(Requestor's Name)				
•				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
L18-20214				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				



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EXAMINER

S. HAWKES

S. HAWKES

EXAMINER

EXAMINER



June 16, 2009

ANTHONY AIELLO 703 STONE WOOD CT 16A JUPITER, FL 33458

SUBJECT: ALLSTAR TRASH VALET LLC.

Ref. Number: L08000020214

We have received your document for ALLSTAR TRASH VALET LLC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 409A00020409

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	AllStar T	rash Valet, LLC		
Soldier.		ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
Anthony Aiello Name of Person				
AllStar Trash Valet, LLC				
Firm/Company				
	70	3 Stonewood Ct. 16A		
		Address		
		Jupiter, FL 33458		
		City/State and Zip Code		
	E mail addrage (champt83@aol.com to be used for future annual report notifica	Son V	
		•	uony	
For further information	concerning this matter, please o	ali;		
Aı	nthony Aiello	at (561) 33	39-6788	
Name of Person		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)	
MAH INC ADDRESS.		CTDEET/COUDIE	D ADDRESS.	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AllStar Trasl	n Valet, LLC		<u></u>
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appear Liability Company)	s on our records.)	
			75 S 77
The Articles of Organization for this Limited Liability Company	were filed on	2-22-08	and assigned
Florida document numberL08000020214			Tand assigned
This amendment is submitted to amend the following:			9 2 2
A. If amending name, enter the new name of the limited lial	bility company her	<u>e</u> :	ال المالية
Environmental V	Vaste Services	LLC	الله مند (۱۰۰۱) است است است
The new name must be distinguishable and end with the words "Lim" L.L.C."	ited Liability Compa	ny," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	703 Stonewo	od Ct. 16A	
(Principal office address MUST BE A STREET ADDRESS)	Jupiter, FL 33	3458	
Enter new mailing address, if applicable:	P.O. Box 295	8	
(Mailing address MAY BE A POST OFFICE BOX)	Jupiter, FL 33	3468	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address:	re:	our records, <u>enter</u>	
		, Florida _	7: 0 1
	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 **Name** <u>Address</u> Type of Action ☐ Add ☐ Remove Remove Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Dated_ Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00

Anthony Aiello
Typed or printed name of signee