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D. BRUCE
DEC 12 2008
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Be of Service Now, 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:	
Richard S. Ohlsson (Name of Person)	
Be of Service	
(Firm/Company)	
14 S Line Ave Accident	
	<b>-</b> Th
Savasota FL 34237 BE = 1	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Richard S. Ohlsson at 841, 544-2895 (Name of Person) (Area Code & Daytime Telephone Number)	
· · · · · · · · · · · · · · · · · · ·	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	sed)

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

Be of Service	Now L	LC.			
Be of Service Name of the Limited L	ability Company a lorida Limited Liabi	s it now appears lity Company)	on our record	<u>s.</u> )	
The Articles of Organization for this Limited Liab Florida document number <u>LO 80000 225</u>		e filed on <u>Mo</u>	ech 3 2	008 and assigned	
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of the Service, [	LC.	· · · · · · · · · · · · · · · · · · ·		75.0	
The new name must be distinguishable and end with t "L.L.C."	he words "Limited I	iability Compan	y," the designat	ion TLD of the abbrevia	rtion
Enter new principal offices address, if applicab	le:	Same as	before	<u> </u>	
(Principal office address MUST BE A STREET)	ADDRESS)	<del></del>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<del>,,</del>	ame as	before		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office e address here:	address on ou	r records, <u>en</u>	iter the name of the i	1ew
Name of New Registered Agent:	Same as	before	<del> </del>	<del></del>	<del></del>
New Registered Office Address:	same as	before	er Florida stre	et address)	_
			, Florid		
New Desistered Assetts Standard to the major Des	(C	ity)		(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

MGRN	M = Managing Member	·	
<u>Title</u>	Name	Address	Type of Action
	NIA		Add
	/		☐ Remove
			Remove
			Add
	_		
-			
D. If a	mending any other information, enter	r change(s) here: (Attach additional sheets, if	necessary.j
	N/H		<del></del>
			A A A A A A A A A A A A A A A A A A A
			SSS T
	<del></del>		一篇二届
Dated _	Dec 08 - 2008.		PN D: FUDRIE
Dated _	thec of two,	•	第四 <b>年</b>
			<del>-&gt;</del>
		member or authorized representative of a member	
	Richard S. C	DN SSON Typed or printed name of signee	
		r Abeer or britinest nature or suffice.	

Page 2 of 2

Filing Fee: \$25.00