L08000031893

(Requestor's Name)
(Address)
(144.425)
(Address)
(City/State/Zip/Phone #)
(6.9, 6.0.0.2, 1.1.1.6.1.)
☐ PICK-UP ☐ WAIT ☐ MAIL
LICITOI LIVE AND LIVE
(Business Entity Name)

(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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Office Use Only



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08/19/19--01013--024 **25.00

SECHETARY OF STATE

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Division of Corporations

Please see enclosed paperwork and fee for change of ownership and contact for PROPERTY SERVICES OF BREVARD, LLC.

My husband, David Charles Grammer, passed away on May 15, 2019. Proof of death is enclosed.

As the co-owner, I am requesting ownership change to 100%.

Thank you.

Alexandra Fusto Grammer

321-258-4082

TO SEE TO BE OF TO

COVER LETTER

TO: Registration Section Division of Corpo			
SUBJECT: [ROPER	Service Name of Limit	of Brevery	
	Name of Limit	ed Liability Company	
The enclosed Articles of An	nendment and fee(s) are subn	nitted for filing.	
Please return all corresponde	ence concerning this matter to	o the following:	
	ALEXANDM	Name of Person Service of Pirm/Company	n er_
		Name of Ferson	e .
	UROPERTY	Service d	bre vario
		Firm/Company	
	6913 Repl	M Dalve Address	
		Address	
	Melbo	City/State and Zip Code	32990
		City/State and Zip Code	
	Kima 1-trai	selazent. Co	ort notification)
For further information cond	cerning this matter, please cal	·	, manitalist,
To take morning		•••	
ALEXANDM FUS	to Grunnar	_at(321) 45	13-4175
Name of Pe	erson	Area Code D	Daytime Telephone Number
Enclosed is a check for the f	following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	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



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 3, 2019

ALEXANDRA FUSTO GRAMMER PROPERTY SERVICES OF BREVARD 6913 KEPLAR DRIVE MELBOURNE, FL 32940

SUBJECT: PROPERTY SERVICES OF BREVARD LLC

Ref. Number: L08000031893

We have received your document for PROPERTY SERVICES OF BREVARD LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You need to complete the attached amendment form.

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 819A00018076

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROPERTY Se	rul Ces	N	BRE UA	no, 22	<u></u>	
(Name of the Limited	Liability Compai Florida Limited L	n <u>y as it now</u> liability Con	y appe <mark>ars on ot</mark> npany)	r records.)		
The Articles of Organization for this Limited Lial		were filed	Ion <u>3</u>	18/200	$\hat{Z}_{\underline{}}$ and as:	signed
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited liabi	lity comp	oany here:			
The new name must be distinguishable and contain the wor	ds "Limited Liabili	ity Compan	y," the designat	ion "LLC" or the	abbreviation "L	L.C,"
Enter new principal offices address, if applical	ole:					· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET	ADDRESS)	-			16	- <u>- </u>
)EP 12	
Enter new mailing address, if applicable:					3	<u> </u>
Mailing address MAY BE A POST OFFICE B	<u>0x)</u>				2: 10	TO THE
B. If amending the registered agent and/or registered agent and/or the new registered offi	•		ess on our	records, ente	er the name	of the new
Name of New Registered Agent:	ALEXAMO)	m E	Fuszo G	umner		
New Registered Office Address:	6913		nter Florida stre	vet address		
	Melbo	ya re		. Florida	320	90
		City	1.	, · -	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 605, 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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
Man	DAVID Charles Grunner	6913 Kepun Da Melboyan, R 3294	🗆 Add
		Me boyan, R 32941	Remove
			Change
MER	ALEXALDM FUSTO GRANMEN	6913 Kerma Da	Add
		MELBOYENFEL 52990	Remove
			Change
			Add
			□ Remove
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(If an ef Note:	ive date, if other than the date of filing: (optional) (cetive 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)(If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the tent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Sept. 9. 2019. Alerah Jus Gra
	Signature of a member or authorized representative of a member
	ACRANDA FUS TO GRAMMER Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00