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2009 FEB 23 PH 2: 18

C. LEWIS
FEB 24 2009
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: All Child Company) (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:
Abdill Panirer
All City Services, U.C. (Firm/Company)
9107 SW 109 Terrau (Address)
Miami, FL 33/57 (City/State and Zip Code)
For further information concerning this matter, please call:
Abdul Ramiréz at (784) 584-1824 (Name of Person) at (784) 584-1824 (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)

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



February 13, 2009

ABDIEL RAMIREZ ALL CITY SERVICES, LLC 9167 SW 169 TERRACE MIAMI, FL 33157

SUBJECT: ALL CITY SERVICES LLC

Ref. Number: L08000048184

We have received your document for ALL CITY SERVICES 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):

If you are trying to file a document to change the LLC to a corporation. You have filled out the wrong form. You need to fill out a conversion form. If you are trying to just change the company name, you must use the suffix LLC, you can not use inc for the suffix of a limited liability company.

Please return the corrected original and one copy of 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) 245-6047.

Letter Number: 909A00005244

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2009 FEB 23 PM 2: 18

(Name of the Limited Limited Limited L	iv as it now aypears on our records	SECRETARY OF STATE TALLAHASSEE, FLORIDA D
The Articles of Organization for this Limited Liability Company Florida document number L08000 48184	were filed on	and assigned
This amendment is submitted to amend the following:		-
A. If amending name, enter the new name of the limited liabi The new name must be distinguishable and end with the words "Limit "L.L.C."	1.1.0	on "LLC" or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	9117 W 109 TV	rau 5157
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 43	1202
B. If amending the registered agent and/or registered office address here	ice address on our records, ent	ter the name of the new
Name of New Registered Agent:	NA	
New Registered Office Address:	(Enter Florida stree	1 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 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:

IGR = M IGRM =	íanager Managing Member		
<u>`itle</u>	Name	Address	Type of Action
			Add Remove
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			Add Remove
	,		Add Remove
			Add Remove
If amer		nge(s) here: (Attach additional sheets, if nevess NAME TO CUHER PAINT	
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	Abd	er or authorized representative of a member LU PUMILU d or printed name of signee	PH 2: 18 FEEFLORIDA

Page 2 of 2

Filing Fee: \$25.00