

209000036211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

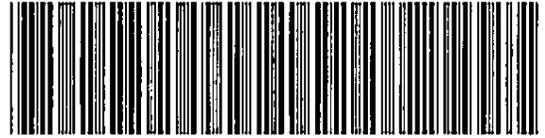
(Business Entity Name)

(Document Number)

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01/13/20--01015--023 **25.00

20 JAN 13 AM 8:47
STATE OF MISSISSIPPI
DEPARTMENT OF REVENUE

FEB 11 2020
C McNAIR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A.S.A.P. INVESTMENT HOLDINGS LLC
Name of Limited Liability Company

Division of Corporations
20 JAN 13 AM 8:47

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALDO DISORBO
Name of Person
A.S.A.P. INVESTMENTS HOLDINGS LLC
Firm/Company
1441 SW 29TH AVE
Address
POMPANO BEACH, FL 33069
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALDO DISORBO 954 9582261
Name of Person at () 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)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Division of Corporations
20 JAN 13 AM 8:47

A.S.A.P. INVESTMENT HOLDINGS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/14/2009 and assigned Florida document number L09000036211.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

1441 SW 29TH AVE

Enter Florida street address

POMPANO BEACH, Florida 33069

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 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

JUST UPDATING THE REGISTERED AGENT ADDRESS. THE REGISTERED AGENT REMAINS AS

ALDO DISORBO.

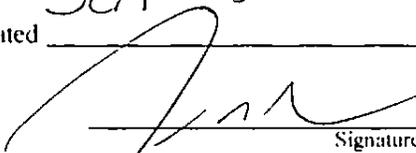
E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective 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)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Jan 8, 2020



Signature of a member or authorized representative of a member

Aldo Disorbo
Typed or printed name of signee

Cindy

From: aldo@movingcost.com
Sent: Thursday, December 19, 2019 10:43 AM
To: corpaddresschange@dos.myflorida.com
Cc: cindy@nrs-corps.com
Subject: A.S.A.P Investments Holdings, LLC Document: L09000036211

Hello,

I would like to update the Registered Agent Address for my entity:

A.S.A.P Investments Holdings, LLC
Document number: L09000036211

Please update the Registered Agent address to:

Disorbo, Aldo
1441 SW 29th Ave
Pompano Beach, FL 33069

If you need any additional information, please let me know.

Thank you!

Aldo Disorbo
954-849-8575