1100000 25400

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	: :ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	dusiness Entity Name)	
(D	Occument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



200319375902

2018 OCT 15 AH 7:21

10/16/18--01003--026 **25.00

M. MILLIGAN OCT 2 0 2018

COVER LETTER

ν, '

SI(DIECT.	AA-TEAM	ENVIRONMENTAL LLC	•	
SUBJECT:		Name of Lim	ited Etability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspo	ondence concerning this matter	to the following:	
		Amparo Avella		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
Division of Corporations AA-TEAM ENVIRONMENTAL 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: Amparo Avella Name of Person AA-Team Environmental LLC Finm/Company 6460 SW 26 Street Address Miami, FL, 33155 City/State and Zip Code avella@aateame.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Amparo Avella Name of Person Area Code Daytine Telephone Number Base of Person Mall ING ADDRESS: Registration Section Division of Corporations P.O. Bus 6827 STREET/COURIER ADDRESS: Registration Section Division of Corporations P.O. Bus 6827 Ciliton Building				
	Division of Corporations AA-TEAM ENVIRONMENTAL LLC Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. assertium all correspondence concerning this matter to the following: Amparo Avella Name of Person AA-Team Environmental LLC Firm/Company 6460 SW 26 Street Address Miami, FL, 33155 City/State and Zip Code avella@aateame.com E-mail address; (to be used for future annual report notification) further information concerning this matter, please call: years A-cells Name of Person Area Code Daytime Telephone Number MALING ADDRESS: Registration Section Division of Corporations P, O, Box 6327 Cittle Status City State and Zip Code avella@aateame.com E-mail address; (to be used for future annual report notification) Area Code Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Division of Corporations P, O, Box 6327 Cittien Building Citteen Building Cittien Courier Circle			
			Address	
		Miami, FL, 33155		
			City/State and Zip Code	
		-		
For further i	nformation c		·	tification)
		oneering and matter, preuse e		
		£ p	at ()	T 1 1 N 1
	Name o	r rerson	Area Code Daytii	ne Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fee		Certified Copy	Certificate of Status & Certified Copy
, e	Registr Divisio P.O. Bo	ration Section on of Corporations ox 6327	Registration Sect Division of Corpo Clitton Building	ion orations 'enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AA-TEAM ENVIRONMENTAL,	LLC		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Name of the Lim	ited Liabitity Com (A Florida Limite	pany as it now appears on our records d Liability Company)	a a a
The Articles of Organization for this Limited I Florida document number L10000025400	Liability Compar	ny were filed onMarch 8, 2010	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited li:	ability company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Lia	bility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		N/A	
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and registered agent and/or the new registered of			enter the name of the new
Name of New Registered Agent:	N/A		
New Registered Office Address:		Enter Florida street address	
		Ener i no ma so cer maress	
		, Flo	rida 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>	Address	Type of Action
VP	Yamila Rosales	7215 Southgate Blvd, Margate, FL 33068	■ Add
			Remove
			Change
MGRM	Gerald Font	6460 SW 26 Street, Miami, FL 33155	Add
			Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			□ Change
			☐ Remove
			☐ Change
			🖸 Add
			□ Remove
			Change

N/A			
,			
			
	·		
			
	,		
Iffective date, if other than the data effective date is listed, the date must be some of the date inserted in this block ocument's effective date on the Dep	be specific and cannot be prior to date of filing on the does not meet the applicable statutory fi	(optional) or more than 90 days after filing.) Pursuant to liting requirements, this date will not be	o 605.0207 (1 e listed as th
e record specifies a delayed The 90th day after the reco	effective date, but not an effectiv rd is filed.	e time, at 12:01 a.m. on the e	arlier of:
October 12	2018		201
			- X (C)
	/ NA (J		رت ن
	ignature of a member or authorized representa	tive of a member	2018 OCT 15

Page 3 of 3

Filing Fee: \$25.00