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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	OSCH MAK Name of Lim	2/NE VACHI ited Liability Company	SERVICES, LC
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	_OCKERT	BOSCH Name of Person	
	BOSCH N	HAPINE VACA Firm/Company	4T SERVICES, LLC
	757 SE	17 th STREBT,	# 822
	FORT LAC BOSCH D E-mail address: (City/State and Zip Code BOSCHHALINE, to be used for future annual report notif	COM
For further information of	concerning this matter, please ea	ıll:	
OCKELT Name o	BOSCH of Person	at (<u>954) 3 76 -</u> Area Code Daytimo	- 0432 : Telephone Number
Enclosed is a check for t	he 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)
. MAII	ING ADDRESS:	STRFFT/COHDU	FD ANDDESS:

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
Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOSCH MARIA (Name of the Limited)	Liability Company	SERVICES as it now appears on our records.	, 11	<u>C</u>	
The Articles of Organization for this Limited Lia Florida document number $\angle 100000$	bility Company we				gned
This amendment is submitted to amend the follow					
A. If amending name, enter the new name of t	the limited liabilit	y company here:			
The new name must be distinguishable and contain the wo	rds "Limited Liability	Company," the designation "L1.C"	or the abbrevi	ation "L.l	c."
Enter new principal offices address, if applica	ble:		 	— <u>≻-</u> -	
(Principal office address MUST BE A STREET	ADDRESS)	· · · · · · · · · · · · · · · · · · ·	A.)19 <mark>0</mark> 0	
Enter new mailing address, if applicable:	-			C 10 F	
(Mailing address MAY BE A POST OFFICE B	· OX)			— <u>∓</u>	· r-
The state of the s	<u>~</u>		<u>-</u>	ယ္	
B. If amending the registered agent and/o registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	OCKER	BOSCH IJA STREET Enter Florida street address CUDERDALE. Flor	# 9.	22	

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 = Aut	thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMGR	OCKERT BOSCH	757 SE 17 A STREET, # 92-	2 ☑ Add
		TT. LAUDERDALE, FL333/B	□ Remove
			Change
AMGR	GISELA KLINCK-ALG	LAUDERHILL, FL 33319	'.2// □ Add
		LAUDERHILL, FL 33319	Remove
			□ Change
			□ Add
			Remove
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n effecti i <u>te:</u> If i	date, if other than the day we date is listed, the date must be the date inserted in this block is effective date on the Depar	e specific and can c does not meet	inot be prior to da the applicable	te of filing or more	than 90 days after	filing.) Pursuant to	605.02 listed
		effective date	e, but not an	effective tim	e, at 12:01 a	.m. on the ea	ırlier
	d specifies a delayed e oth day after the record						
he 90	oth day after the record	d is filed.	Mosc	<u>J</u>			
he 90	oth day after the record	d is filed.	of to or authorized	representative of a	a member		-

Page 3 of 3

Filing Fee: \$25.00