L10000091664

| (Re | equestor's Name) | • | | | |
|---|------------------|-----------|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only





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COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---------|
| SUBJECT: AC MANAGEMENT SERVICES, LLC | |
| SUBJECT: AC MANAGEMENT SERVICES, 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: DORCAS G. TROCHE | -cac |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. | KI CO |
| Please return all correspondence concerning this matter to the following: | ₹; } |
| DORCAS G. TROCHE | 5 |
| (Name of Person) | |
| RCG ACCOUNTING & ASSOCIATES INC. | |
| (Firm/Company) | |
| 9000 SHERIDAN STREET SUITE 138 | |
| (Address) | |
| PEMBROKE PINES, FL 33024 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| DORCAS G. TROCHE at (954) 862-2222 EXT 3 | |
| (Name of Person) (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the following amount: | |
| \$\sumset\$\sums |) |
| 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 | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



AC MANAGEMENT SERVICES, 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 08/31/2010 | and assigned | |
|---|--|-------------------------------------|--|
| Florida document number <u>L10000091664</u> | · | | |
| This amendment is submitted to amend the following: | : | | |
| A. If amending name, enter the new name of the li | imited liability company here: | | |
| ARTURO CARDENAS, LLC | | | |
| The new name must be distinguishable and end with the v"L.L.C." | words "Limited Liability Company," the des | signation "LLC" or the abbreviation | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | (Enter Florid | a atmost address) | |
| | (Enter Florida street address) | | |
| | , Florida (City) (Zip Code) | | |
| | (City) | (Zip Code) | |
| New Registered Agent's Signature, if changing Register | ered Agent: | | |
| I hereby accept the appointment as registered age, | | | |

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 Changing Registered Agent, Signature of New Registered Agent)

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:

MGR = Manager

| MGRM = M | lanaging Member | | |
|--------------|---------------------------------|--|---------------------------------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| D. If amend | ling any other information, ent | er change(s) here: (Attach additional sheet | ts, if necessary.) |
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| Dated JUNE | E 18 | , 2012 | |
| | Signature of | a member or authorized representative of price | mber . |
| | ARTURO CARDENAS | Typed or printed name of signee | · · · · · · · · · · · · · · · · · · · |

Page 2 of 2