## L11000136248

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# P. O. BOX 7036 WINTER HAVEN, FL 338883 863-528-3528

September 30, 2021

Division Of Corporations Registration Section P. O. Box 6327 Tallahassee, FL 32314

Re: FEIN: 45-3997127

Sirs:

Enclosed please find check #<u>JO90</u> in the amount of \$25.00, Cover Letter and Articles Of Amendment To Articles Of Organization of American Process Service, LLC.

I am respectfully requesting to change the name to:

**American Process Service & Investigations, LLC** 

and updating the New Registered Office Address:

274 W. Central Avenue, Winter Haven, FL 33880

Every things else remains the same.

Sincerely

Barry Gaston, Sr. Registered Agent

**Enclosures** 

#### **COVER LETTER**

Tallahassee, FL 32314

	Registration So Division of Co				
SUBJEC	ът.	American Process Service, I	LLC		
SOBJEC		Name of Lim	ited Liability Company	······································	
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		Barry Gaston, Sr.			
		-	Name of Person		
		American Process Service	, LLC	•	
			Firm/Company		
		P. O. Box 7036			
			Address		
		Winter Haven, FL 33883			
			City/State and Zip Code	<del></del>	
		apsforhire@gmail.com			
		E-mail address: (	to be used for future annual report not	ification)	
For furth	er information o	concerning this matter, please c	all:		
Barry Ga	iston, Sr.		863 528-3528 at ( )		
Name of Person		Area Code Daytim	ne Telephone Number		
Enclosed	is a check for the	he following amount:			
□ \$25.0	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 Addres		Street Address:		
	Registration !		Registration Section		
	Division of C P.O. Box 632		Division of Cor The Centre of T	-	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

ARTI	CLES OF ORGA OF	NIZAT	ION	and assigned
	OI.			9.
American Pro	cess Service, LLC			
(Name of the Limite	d Liability Company as it A Florida Limited Liability	now appears Company)	on our records.)	بن الم
The Articles of Organization for this Limited Lia	bility Company were fi	iled on	12/02/2011	and assigned
Florida document number L11000136248	·			
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liability co	mpany her	<u>·e</u> :	
American Process Service & Investigations	<u> </u>			
The new name must be distinguishable and contain the wo	rds "Limited Liability Com	pany," the des	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	ble: 274	W. Central	Avenue	
(Principal office address MUST BE A STREET ADDRESS)		iter Haven, F	FL 33880	
	<del></del>			
Enter new mailing address, if applicable:	n/a			
(Mailing address MAY BE A POST OFFICE B	(OX)			
				_
B. If amending the registered agent and/or re		s on our re	cords, <u>enter the na</u>	me of the new registere
agent and/or the new registered office address	<u>here</u> :			
Name of New Registered Agent:		<u> </u>	<u> </u>	
New Registered Office Address:	274 W. Central Avenue		<u></u> .	
		Enter Florid	da street address	
	Winter Haven		, Florida	33880
	Cit	יו		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 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
			□ <b>A</b> dd
			□Remove
			□Change
			□ Add
			Remove
			Change
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			Remove
			□Change

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f an effective da Note: If the d	e, if other than the date of filing:  tte is listed, the date must be specific and cannot be prior to date of fil  tate inserted in this block does not meet the applicable statuto fective date on the Department of State's records.	(optional) ling or more than 90 days after filing.) Pursuant to 605.0207 ( ory filing requirements, this date will not be listed as t
record specif d is filed.	fies a delayed effective date, but not an effective time, at 12:0	11 a.m. on the earlier of: (b) The 90th day after the
	September 30 2021	
Dated	15 1 14	
Dated	and the	
Dated	Signature of a member or authorized repres	sentative of a member