## 1200051537

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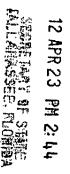
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**EXAMINER** 



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## **COVER LETTER**

TO: Registration So Division of Co		#	•
SUBJECT: MJ	ERR MAINTE	ENANCE SERVICE	s LLC
*		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	RICARDO	RESTREPO Name of Person	
	MJ ÉRR.	Maintenances :	Sec. 11C
Committee to the committee of the commit		· ······ company	
	1040 Wes	+ Main Str	eet
		11001400	
	Lakeland,	City/State and Zip Code  RPO OCMAT  o be used for future annual report notifica	<del>-</del> . 
	222222	City/State and Zip Code	1 604
•	E-mail address: (t	o be used for future annual report notifica	L.CO/V
For further information c	oncerning this matter, please ca		
BICARDO	RESTREPO	at (863) 221 - 4	// &/
Name o	f Person	Area Code & Daytime T	elephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

MAINTENANCE SERVICES LLC

(A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L12000051537</u> .	by were filed on April 16, 2012 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	VCE SERVICES LLC
The new name must be distinguishable and end with the words "Lin" "L.L.C."	nited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	PR TR
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of	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:	Enter Florida street address

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 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

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If amen	ding any other information, ente	r change(s) here: (Attach additional sheets, if n	
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ted	poil 18,	2012	
	Signature of Rices	Typed or printed name of signer	

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Filing Fee: \$25.00