# L12000061828

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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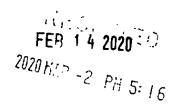
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February 6, 2020

PATRICK M. O'CONNOR O'CONNOR LAW FIRM 2240 BELLEAIR RD #115 CLEARWATER, FL 33764

SUBJECT: ABESCO FIRE, LLC Ref. Number: L12000061828

We have received your document for ABESCO FIRE, LLC. However, the document has not been filed and is being returned for the following:

Office policy prevents this office from processing the enclosed check(s). All checks processed by this office must be payable in U.S. dollars and drawn on a bank located in the United States.

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 320A00002708

# **COVER LETTER**

TO: Registration Sec Division of Corp						
SUBJECT: AB	ESCO FIRE	LLC				
	Name of Limi	ited Liability Company				
	Amendment and fee(s) are sub-					
	DALE RE	EDMOND				
		Name of Person				
ABESCO FIRE LLC						
		Firm/Company				
	515 VENTURA AUE  Address					
Address						
ORLANDO, FL 32805  City/State and Zip Code  USSALFS @ ABESCO, NET						
	110001	City/State and Zip Code	ET			
•	E-mail address: (	to be used for future annual report notif	ication)			
For further information co	oncerning this matter, please ca	all:				
DALE 1	EDMOND	at (407) 851	- 3300			
DALE RED'MOND at (407) 851-3300  Name of Person Area Code Daytime Telephone Number						
Enclosed is a check for th	e following amount:					
□ \$25.00 Filing Fee	\$\times \text{S30.00 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 Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ABESCO FIRE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) Florida document number <u>L12000061828</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered 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

## 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.

City

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
MGR	ROSEMARY O'KEEFFE	515 VENTURA AVE	<b>X</b> )Add
		ORLANDO, FL 37805	□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			🗆 Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated February 34. 2020

Signature of a member or authorized representative of a member

DALE REDMOND

Typed or printed name of signee