L12000107417

(Rec	questor's Name)	
(Add	dress)	- H
(Add	dress)	
(City	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to f	Filing Officer:	

Office Use Only



100386423501

84/29/22--01012--620 **25.00

T. MATTHEWS JUN 21 2022

ARTICLES OF AMENDMENT TO FILED ARTICLES OF ORGANIZATION SECRETARY OF STATE OF

22 APR 29 AM 9: 52

York Services, LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited l	inv as it now appears on our record Liability Company)	ds.)
The Articles of Organization for this Limited L		were filed on August 17, 2012	and assigned
Florida document number L12000107417	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		9214 Bexley Drive	
(Principal office address MUST BE A STREET ADDRESS)		Fory Myers, FL 33967	
Enter new mailing address, if applicable:		9214 Bexley Drive	
Enter new maining address, it applicable: (Mailing address MAY BE A POST OFFICE BOX)		Fort Myers, FL 33967	
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records, <u>enter</u>	the name of the new register
Name of New Registered Agent:			
New Registered Office Address:	9214 Bexley D	rive	
the second secon		Enter Florida street addre.	SS
	Fort Myers	. FI	lorida <u>33967</u>
		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 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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Cody Lynch	9214 Bexley Drive, Fort Myers, FL 33967	🗆 Add
			□Remove
			■ Change
MGR	Amber Lynch	9214 Bexley Drive, Fort Myers, FL 33967	
			□Remove
			🖩 Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Aðd
		□Remove	
		□Change	
			□Add
			□Remove
			□Change

Should you need a	nything further please call A	imber Lynch at 239	9-210-1439.		
					
		 _			
					
					
				-	
					
					
			-		
					
					
					
				-	
activa data if ather	than the date of filing: $\frac{0}{2}$	4/26/2022			
i effective date is listed, i	ne date must be specific and can	not be prior to date of	filing or more than 90	(optional) days after filing.) Pursuant (to 605.0207
<u>te:</u> If the date inserted	in this block does not meet on the Department of State	the applicable stati	utory filing requirem	ents, this date will not b	e listed as
		· · · · · · · · · · · · · · · · · · ·			
cord specifies a delay	d effective date, but not an o	offective time at 1°	2:01 a.m. on the earli	ior of: (b) . The With day	ration tha
s filed.			s.or a.m. on the carr	ici or. (0) - The 20th day	anei me
1 and	0.4				
ed April	20 1.2	022			
		1			
	100		resentative of a membe		_

Filing Fee: \$25.00