L12000130979

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PICK-UP	WAIT	MAIL	
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Certified Copies Certificates of Status			
Consideration to			
Special Instructions to	Filing Officer:		

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COVER LETTER

TO:	Registration S Division of Co		
SUBJE		FLORIDA AUDIT AND ASSURACE SERVICES LLC	
SODJE		Name of Limited Liability Company	
The encl	osed Articles o	of Amendment and fee(s) are submitted for filing.	
Please ro	eturn all corresp	pondence concerning this matter to the following:	
		THEODORE A. PIOQUINTO	
		Name of Person	
		BOCA ACCOUNTING, LLC	
		Firm/Company	
		190 NW SPANISH RIVER BLVD #200	
		Address	
		BOCA RATON, FL 33431	
		City/State and Zip Code	
		ted@bocaaccounting.com	
		É-mail address: (to be used for future annual report	notification)
For furth	er information	concerning this matter, please call:	
TED PIC	OQUINTO	561 226-464 at ()_	
	Name	of Person Area Code Da	ytime Telephone Number
Enclosed	is a check for	the following amount:	
■ \$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 10/15/2012	and assigned
Florida document number L12000130979		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
SOUTH FLORIDA AUDIT AND ASSURANCE SERVICES LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the nam	e of the new regi
agent and/or the new registered office address nere.		
Name of New Registered Agent:	NA	
New Registered Office Address:		3
	Enter Florida street address	
		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
	NIA		□Add
			Remove
			☐ Change
			□Remove
			□ Change
			□ Add
			□Remove
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			Change
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			□Remove
			□ Change
			□Remove
			(*) (1

Effective date, if other than the date of filing: (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 (Condense). Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as if document's effective date on the Department of State's records. 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 cord is filed. Dated MAY 4 2021 The MAY 4 Signature of a member or authorized representative of a member.			·			
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Signature of a member or authorized representative of a member	MAVA		2021	·		
Signature of a member or authorized representative of a member	Dated		<u> </u>			
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