1200003475

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Charles in the control of the contro				

Office Use Only



200252546222

10/15/13--01057--005 **30.00

2013 OCT 15 AM 8: 07

J. SAULSBERRY EXAMINER OCT 17 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

MIAMI ACCOUNTING & TAX SERVICES LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RUBEN ZURGA		
Name of Person		
Firm/Company		
1021 SW 85TH TER		
Address		

PEMBROKE PINES, FL 33025

City/State and Zip Code

RUBEN@MIATAX.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RUBEN ZURGA

_{at} 305, **/42-8443**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 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 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 **OF**

MIAMI ACCOUNTING & TAX SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document number <u>L13000003475</u> .	were filed on 01/08/2013	and assigned	i
This amendment is submitted to amend the following:	•		
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designat	ion "LLC" or the abbrev	 viatio
Enter new principal offices address, if applicable:	260 NE 17TH TER		
(Principal office address MUST BE A STREET ADDRESS)	SUITE 206		
	MIAMI, FL 33132	- <u>7 73 </u>	
		<u> </u>	
Enter new mailing address, if applicable:		<u> </u>	, comme
(Mailing address MAY BE A POST OFFICE BOX)			177
-			·,
		25 5	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter the name of the	nev
Name of New Registered Agent:			
New Registered Office Address:			
-	Enter Florida stree	et address	
	, Florid	ia	
	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 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

MGRM = Managing Member Type of Action **Title** Name 1 **Address** 1021 SW 85TH TER **RUBEN ZURGA MGRM** PEMBROKE PINES FL 33025 TRAVIS HENRY 717 JEFFERSON AVE **MGRM** SUITE 6 MIAMI BEACH FL 33139 1021 SW 85TH TER TRIPLE M ACCOUNTING INC **MGRM** PEMBROKE PINES FL 33025 Remove 717 JEFFERSON AVE **MGRM** TH BOOKKEEPING INC SUITE 6 Remove MIAMI BEACH FL 33139 __i Remove ഗ ထ္ Remove

If amending any other informat	tion, enter change(s) here: (Attach additional sheets, if necessary.)
Please add our l	EIN number 80-0882417
October 11	2012
_{ed} October 11	, <u>2013</u>
	1.1
	De U
Sign	nature of a member or authorized representative of a member
Ruben Zurga	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

