

L130000 49615

(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:

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Amend

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2013 JUL -1 AM 8:20
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

J. SAULSBERRY
EXAMINER
JUL -2 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Angel Services 2 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:

Jose Esayag Tendler

Name of Person

Angel Services 2 LLC

Firm/Company

19900 E Country Club Drive

Address

Aventura FL 33160

City/State and Zip Code

jose.esayag@drivemeangel.com

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

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2013 JUL -1 AM 8:30
TALLAHASSEE, FL
STATE

For further information concerning this matter, please call:

Jose Esayag Tendler

Name of Person

at **(305) 2066050**

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**

Angel Services 2 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 were filed on 04/04/2013 and assigned
Florida document number L1300049615.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The Angel Services LLC

The new name must be distinguishable and end with 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)

17800 W Dixie Highway

Suite C

North Miami Beach FL 33160

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

17800 W Dixie Highway

Suite C

North Miami Beach FL 33160

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: Sandra Hoyos Mejia PA

New Registered Office Address: Miguel R Saavedra

Enter Florida street address

19900 E Country Club Drive Apt 802, Florida 33160

Aventura City 33160

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

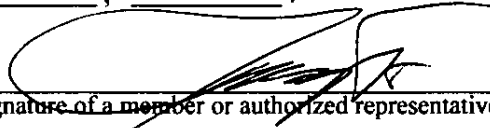
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
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 FALL A/M 9:15 AM
 FALL A/M 9:15 AM

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated June 28th, 2013


Signature of a member or authorized representative of a member

Jose Esayag Tandler

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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2013 JUL -1 AM 8:30
CLERK OF STATE
TALLAHASSEE, FL 32301