

L13000 095 096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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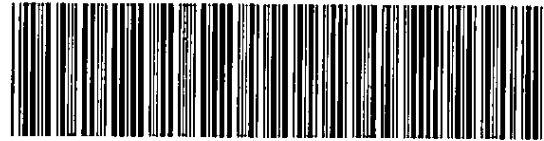
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
19 SEP 20 AM 9:11

Amend/ name change

09/20/19

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PE MULTISERVICE 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:

JOEL LALL

Name of Person

1861 NW 62 ST LLC

Firm/Company

1414 NE 135 ST

Address

NORTH MIAMI, FL 33161

City/State and Zip Code

Newventureproperties@live.com

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

For further information concerning this matter, please call:

LANCE LALL

305 879-2913
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mail TO

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

FILED
DIVISION OF STATE
CORPORATIONS
19 SEP 20 AM 9:11

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

PE MULTISERVICE 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 07/03/2013 and assigned
Florida document number L13000095096.

This amendment is submitted to amend the following:

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

1861 NW 62 ST LLC

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:

1414 NE 135 ST

(Principal office address MUST BE A STREET ADDRESS)

NORTH MIAMI, FL 33161

Enter new mailing address, if applicable:

1414 NE 135 ST

(Mailing address MAY BE A POST OFFICE BOX)

NORTH MIAMI, FL 33161

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:

JOEL LALL

New Registered Office Address:

1414 NE 135 ST

Enter Florida street address

NORTH MIAMI

, Florida 33161

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	LANCE LALL	14311 BISCAYNE BLVD # 1574	<input type="checkbox"/> Add
		NORTH MIAMI, FL 33261	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	JOEL LALL	1414 NE 135 ST	<input checked="" type="checkbox"/> Add
		NORTH MIAMI, FL 33161	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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(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)

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.

Signature of a member or authorized representative of a member

Typed or printed name of signee