

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JR FACILITY & MAINTENANCE MANAGEMENT, LLC

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COVER LETTER

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TO:

Registration Section Division of Corporations

Division of Corporations

JR FACILITY & MAINTENANCE MANAGEMENT, 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:

LEVI DUTRA FERREIRA JR

Name of Person

JR FACILITY & MAINTENANCE MANAGEMENT, LLC

First/Company

1475 KAMPTON CHASE PARKWAY

Addres

ORLANDO, FL 32837

City/State and Zip Code

INFO@ABKCORP.COM

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

For further information concerning this matter, please call:

ALBERTO LEMUS

407 898-1757

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

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☐S60.00 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

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FILED

2013 SEP 18 AH 8 DI

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IN PACIENT & MAINTENANCE LLC	
(Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
(A Florida Limited Liability Company)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

The Articles of Organization for this Limited Liability Company were filed on 09/17/2013 Florida document number <u>L1</u>3000108965 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 5 STAR FACILITY MAINTENANCE 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address Zip Code City

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

Page 1 of 3

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> Name 1 Address Remove Remove Remove Remove .Remove

Page 2 of 3

o. It amending any other information, enter change(s) here: (Atlach additional sheets, if necessary.)
SEDTEMBED 47 2012
SEPTEMBER, 17 2013
Leveren
Signature of a member or authorized representative of a member
LEVI DUTRA FERREIRA JR.
Typed or printed name of signee

Page 3 of 3

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