# #13000137969

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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K. SALY EXAMINER NOV - 5 2013

## **COVER LETTER**

TO: Registration Section
Division of Corporations

# **GROUP SERVICES ENTERPRISES**

SUBJECT: 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:

John Arias
Name of Person
Group Services Enterprises
Firm/Company
4212 Woodlark De
Address
TampaIFL 33624
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

Enclosed is a check for the following amount:

For further information concerning this matter, please call:

\$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)

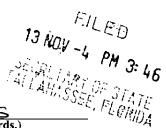
MAILING ADDRESS:

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

at (813) 965 420 4
Area Code & Daytime Telephone Number

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(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 10113 and assigned Florida document number 13000137969

This amendment is submitted to amend the following:

The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addi		er records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Ente	r Florida street address
	Ziic	, Florida
	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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member <u>Title</u> Name **Address Type of Action** JENNIFER ARIAS 4212 Woodlank De Add Tampa, FC 33624 Remove Remove Remove Remove

amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
• -	
-	
-	
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- اا	10/30/13.2013.
	10 30 13 . 2013.
	Signature of a member or authorized representative of a member
	John Arias
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00