# 113000163456

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## **COVER LETTER**

Division of Cor	porations		
SUBJECT: 47/5+1	Charce Nationwide	e Janifor(a) 4 Hamilited Liability Company	enance services, l'e
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Nancy So	hermerho Ka Name of Person	
	First choice N	Eirn/Company	of Hambenance Services, (12
	7006 St	a Roint Court Su Address	rieA
	Winder	Park, H. 32796 City/State and Zip Code	2
	Firstchor(	CIme yahou.com	fication)
For further information c	oncerning this matter, please ca		
Nancy S	Schermerhorn	at ( <u>954) 304-3</u> Area Code Daytim	SY65 e Telephone Number
Enclosed is a check for the	ne 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:

TO: , Registration Section

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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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L13000163456</u> .	were filed on 11-21-2013 and assigned (?)
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 contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	7006 stapont court suite A
(Principal office address MUST BE A STREET ADDRESS)	wher ark, Fl. 32792
Enter new mailing address, if applicable:	7006 Stappint Court
(Mailing address MAY BE A POST OFFICE BOX)	7006 Stappint Court Suite A
	Lunter Park, Fl. 32792
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent: Nancy	Schermerhorn

### New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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 Rogistered Agent, Signature of New Registered Agent

Page 1 of 3

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 Title **Address Type of Action** <u>Name</u> Janer Joya □ Add 203 Gene Cables circle Longual Fl. 30779 ☐ Change Gabriel Joya ₾ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove □ Change □ Add □ Remove ☐ Change ☐ Remove

□ Change

Charle of macine	SS For Nancy Schernerhum
J	SS For Nancy Schernerhum 7006 Stapoint Court
	suite A
· , , , , , , , , , , , , , , , , , , ,	winter Park, Fl. 32792
	WILKE 121 - 141. 281.18
	<u> </u>
ve date, if other than the date of filing	: 11-1-2017 (optional)
If the date inserted in this block does not m	cannot be prior to date of filing or more than 90 days after filing.) Pursuant to teet the applicable statutory filing requirements, this date will not be
ent's effective date on the Department of S	late's records.
ord specifies a delayed effective d	ate, but not an effective time, at 12:01 a.m. on the e
90th day after the record is filed.	
12-11	2017
	<u>~~~</u> .
12-11 Num L	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00