## L14 000 000 16C

(Requ	uestor's Name)	
(Addı	ress)	
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(City/	State/Zip/Phone	<del>;</del> #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doct	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer;	

Office Use Only



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R. HUNT

## **COVER LETTER**

	Registration Se Division of Cor			
SUBJEC		IVERY LLC		
SUBJEC	· <u> </u>	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please rett	ım all correspo	ndence concerning this matter	to the following:	
		MICHAEL VALDES ROI	DRIGUEZ	
			Name of Person Firm/Company	
		805 WOODGATE CT	Address	
		TAMPA, FL 33615	vaciez	
		Michael V	City/State and Zip Code  (A/US 79 C GGho)  to be used for future annual report not	), Com
For further	r information c	oncerning this matter, please ea	all:	
MICHAE	L VALDES RO	DRIGUEZ	at 784 587 Area Code Daytin	-0939
	Name o	f Person	Area Code Daytin	ie Telephone Number
Enclosed i	s a check for th	ne following amount:		
<b>%</b> \$25.0	) Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 01Vib.(3) / Yelly (近51A15 2021 HAR 25 | PH 12: 07

MVR DELIVERY LLC	
(Name of the Limited Liability Compa) (A Florida Limited L	ny as it now appears on our records.) hability Company)
The Articles of Organization for this Limited Liability Company	were filed on 01/02/2014 and assigned
Florida document number L1400000166	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
YM-PAINTING CLEANING REPAIR SERVICES LLC	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	B205 Woodgate ct TAMPA Th 33615
(Principal office address MUST BE A STREET ADDRESS)	TAMPA, Th 33615
Enter new mailing address, if applicable:	Same
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	

			2/19/21 3
			, Florida
	red Agent's Signature, if chang	City	Zip Code
provisions of the coept th	of all statutes relative to the obligations of my position as	stered agent and agree to act in this capacity proper and complete performance of my dutive registered agent as provided for in Chapter the registered office address, I hereby confit this change.	ies, and I am familiar with and 605, F.S. Or, if this document is
		If Changing Registered Agent, <u>Sign</u>	ature of New Registered Agent
lf amendi	ng Authorized Person(s) aut	horized to manage, <u>enter the title, name, and</u>	address of each norsen hains a
or remove	d from our records:	And All Aller and Market Mittel with	more cas of cure her soil hertis at
MGR = 1 AMBR = 1	Manager Authorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
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D. If an	nending any other info	ormation, enter chans	ee(s) here: (Attach addition)	al sheets it necessary)
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			2/19/21 3:47 p. m
			<del></del> _
			_
	02/17/2020		
E. Effective date, if other than the date of filing (If an effective date is listed, the date must be specific and Note: If the date inserted in this block does not a document's effective date on the Department of S.	cannot be prior to date of filing neet the applicable statutory		
If the record specifies a delayed effective date, but not record is filed.	an effective time, at 12:01 a	.m. on the earlier of: (b) The 90th day at	iter the
Dated FEBRUARY 17	2021		
Signature of a l	member or authorized represent	ative of a member	
MICHAEL VALDES RODRIGUEZ	•		
<del></del>	Typed or printed name of sign-	:E	

Filing Fee: \$25.00