Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Tu:

Division of Corporations

Fax Number : (850)617-6383

I-mom:

Account Name : SERVICIOS COMUNITARIOS LATINOS INC

Account Number : I20080000080

: (305)642-1090

**Enter the omail address for this business entity to be used for future annual report mailings. Enter only one email address please.*频序

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JOSE Y GLENDA SERVICES LLC

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Certificate of Status	0
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Estimated Charge	\$25.00

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Corporate Filing Menu

Help

S. WARREN

OCT 2 0 2017

TO.

COVER LETTER

TO:	Reg Divi	lstration Sec sion of Corp	ction porations			
SURTE	1	JOSE Y GL	ENDA SERVICES LLC			
Division of Co JOSE Y G SUBJECT: The enclosed Articles of	·-	Name of Lim	illed Liability Company	· · · · · · · · · · · · · · · · · · ·	. .	
The engl	osed	Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Ploase re	eturn	all correspor	idence concerning this matter	to the following:		
			JOSE VICENTE FRANC	O SANTIZO		
				Name of Person		· ·
			SELF			
				Firm/Company		
			222 SW 17 CT APT 24			
				Address		_
			MIAMI, FL. 33135			
				City/State and Zip Code		_
			VICENTEFRANCO@YAI	IOO.COM to be used for future annual re		_
For furth	២ ព្រ	formution co	notion ing this matter, please of	· · · · · · · · · · · · · · · · · · ·	eporthonneation)	
IOSE VICENTE FRANCO SANTIZO		ne t	-3547			
 ,		Name of	Person	Arca Code	Daytime Telephone Numb	Det
Enclased	lis a	check for the	following amount:			
≒ \$25.0	00 F)	ling Fcc	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Fiting Fee & Certified Copy (additional copy is enclo	Certification (Certification)	Filing Fee, cate of Status & ed Copy and 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 Talininssee, FL 32301

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20003/0007

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOSE Y GLENDA SERVICES LLC		
(Name of the Limited Lightly Comps) (A Florida Limited I	ny as it may appears on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on 01/30/2014	and assigned
Florida document number L14000016915		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	<u>ility company here</u> :	
NONE	•	至名 考
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "t.f.C" or	the abbrevlation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		- P - P - P - P - P - P - P - P - P - P
	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	v	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter the name of the new
registered agent and/or the new registered office address her	<u>e</u> ;	
Name of New Registered Agent:		
N. D. Level (Office 11)		
New Registered Office Address:	Enjer Florida street addrass	.,
	, Florid	łn
		Ziu Coda

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

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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	Name	Address	Type of Action
MGRM	JOSE V. FRANCO SANTIZO	222 SW 17 CT # 24	= Add
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The 90th day	after the rec	ord is filed.					
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Filing Fee: \$25.00-