

L14000028570

(Requester's Name)

S. Schwartz
2705 Blue Acres Dr
Redding, CA
96001

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

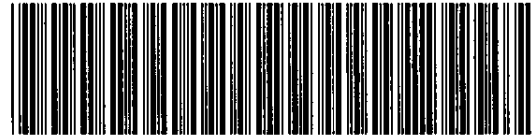
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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TALLAHASSEE, FLORIDA

2014 JUL 25 P 12:09

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B. BOSTICK

JUL 28 2014

F 10 11

To Whom It May Concern,

I have enclosed a change to my LLC Articles of Organization. I applied initially as a single member LLC but realized that was not in my best interest. So I was able to change this as I applied for my ECIN and status with the Federal Government. They have me registered as a partnership LLC. So I wanted to make sure my information was changed in Florida as well, to show my LLC as a partnership and to include the name and address of my partner/member. I read in some documents that this wasn't necessary to change and add a member but I also read in another document that it was necessary to have this information correct; therefore I have submitted the correction to you and hope that you will know how to proceed from here.

Thank you for your time.

Stephanie Schwartz PT



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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Ponce Property and Services LLC

(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 Feb 19 2014 and assigned Florida document number L14000028570

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NA

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

NA

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

NA

(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:

NA

New Registered Office Address:

NA

Enter Florida street address

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 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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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MGR	Stephanie Schwartz	7705 Blue acres Dr. Redding CA 96001	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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MGR	Daniel Gary	1042 Springridge Dr. Redding, CA 96003	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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TALLAHASSEE, FLORIDA

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated June 10, 2014.

Stephanie Schwartz

Signature of a member or authorized representative of a member

STEPHANIE SCHWARTZ

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

Date of this notice: 04-01-2014

Employer Identification Number:
46-5268434

Form: SS-4

Number of this notice: CP 575 B

PONCE PROPERTY AND SERVICES LLC
STEPHANIE LYNN SCHWARTZ MBR
7705 BLUE ACRES DR
REDDING, CA 96001

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 46-5268434. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065

04/15/2015

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

- * Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.** You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

Your name control associated with this EIN is PONC. You will need to provide this information, along with your EIN, if you file your returns electronically.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CP 575 B (Rev. 7-2007)

CP 575 B

9999999999999

DATE OF THIS NOTICE: 04-01-2014
EMPLOYER IDENTIFICATION NUMBER: 46-5268434
FORM: SS-4 NOBOD

PONCE PROPERTY AND SERVICES LLC
STEPHANIE LYNN SCHWARTZ MBR
7705 BLUE ACRES DR
REDDING, CA 96001



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 2, 2014

STEPHANIE SCHWARTZ PT
7705 BLUE ACRES DRIVE
REDDING, CA 96001

SUBJECT: PONCE PROPERTY AND SERVICES LLC
Ref. Number: L14000028570

We have received your document for PONCE PROPERTY AND SERVICES LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The fee to file your limited liability company document is \$25. Please include an additional \$30 for each certified copy (optional) requested and an additional \$5 for each certificate of status (optional) requested.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 914A00014363

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TALLAHASSEE, FLORIDA