M4000062340

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| (City/State/Zip/Phone #) |
| (eny, energy, mane ny |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Certified Copies Certificates of Otatus |
| Special Instructions to Filing Officer: |
| Grand mentalions to haming officers. |
| |
| 1 |
| |
| |
| |

Office Use Only



200375369252

10/25/21--01015--021 **25.00





COVER LETTER

| | stration Sec | | | * |
|---|--|------------------------------|---|--|
| | | MAINTENANCE GROUP L | LLC | |
| SUBJECT: _ | | Name of Lim | ited Liability Company | |
| The enclosed | Articles of A | Amendment and fec(s) are sub | mitted for filing. | |
| | | | · | |
| | | LEXIE RIVERS | | |
| | e enclosed Articles of Amendment and fee(s) are submitted for filing. ase return all correspondence concerning this matter to the following: | | | |
| | | PRIME CORPORATE SE | ERVICES | |
| | | | | |
| | | | | |
| | Address | | | |
| | | MURRAY, UT 84107 | | 202 |
| | | | City/State and Zip Code | |
| | | | | 2021 OCT 25 |
| For further inf | ormation co | | | " - |
| | | | 855 577-4639 | . 17 |
| - | Name of | Person | | phone Number |
| Enclosed is a c | check for the | e 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) |
| | | NG ADDRESS: tion Section | STREET/COURIER A Registration Section | DDRESS: |

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| PARADISE MAINTENANCE GI | ROUP LLC | | | | |
|--|---|--|----------------------|--|--|
| (Name of the Lim | ited Liability Compa (A Florida Limited) | nny as it now appears on our records.) Liability Company) | | | |
| The Articles of Organization for this Limited I Florida document number <u>L14000062340</u> | .iability Company | were filed on <u>04/16/2014</u> | and assigned | | |
| This amendment is submitted to amend the fol | lowing: | | | | |
| A. If amending name, enter the new name of | of the limited liab | oility company here: | | | |
| The new name must be distinguishable and contain the | words "Limited Liabi | lity Company," the designation "LLC" or the a | abreviation "L.L.C." | | |
| Enter new principal offices address, if appli | cable: | 7901 4th Street N Suite 300, St. Petersburg F1, 33702 | | | |
| (Principal office address MUST BE A STRE | ET ADDRESS) | | <u> </u> | | |
| Enter new mailing address, if applicable: | | 7901 4th Street N Suite 300, St. Petersb | ourg FL 33702 | | |
| (Mailing address MAY BE A POST OFFICE | EBOX) | | | | |
| B. If amending the registered agent and registered agent and/or the new registered of | L/ | | the name of the nev | | |
| Name of New Registered Agent: | Registered Age | ents Inc | (N) (J) (T) | | |
| New Registered Office Address: | 7901 4th Street | N Suite 300 | <u>. 1994 /a</u> 19 | | |
| | | Enter Florida street address | | | |
| | St. Datarchuru | 33 | 702 ". CT | | |

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.

City

Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|--------------------------|-----------------------------|-----------------|
| AMBR | PMG Capital Holdings LLC | 30 N Gould St Ste R | ■ Add |
| | | Sheridan, WY 82801 | □ Remove |
| | | | Change |
| MGR | Brian E Young | 11 Hope Road Suite 111 #225 | Add |
| | · | Stafford, VA 22554 | ≅ Remove |
| | | | ☐ Change |
| | | | |
| | | | ☐ Remove |
| | | | Change |
| | | | D Add 202 |
| | | | |
| | | | Change |
| | | | □ Add 27 |
| | | | □ Remove |
| | | | Change |
| | | | Add |
| | | . | ☐ Remove |
| | | | □ Change |

| | | | | | • | |
|--|---|---|--------------------|--|---------------------|-------------|
| | | | | | | |
| | | | | | | |
| | | | | | · | <u> </u> |
| | | | | | | |
| 41-814 | | | | | | |
| | | | | | | |
| | | | | | <u>.</u> | |
| *** | | | | _ | | |
| | | | | | | |
| | | | | | | |
| | , | | | | :. 1-: | 1021 GCT |
| - · | | | | | Fish | |
| | | | | | | _25 |
| | | | | | • • | <u></u> |
| | | | | | | ان. ان: |
| ective date, if other than effective date is listed, the date e: If the date inserted in thi ument's effective date on the | must be specific and s block does not n e Department of S | d cannot be prior to neet the applicat State's records. | ble statutory fili | more than 90 days aft ng requirements, th | is date will not be | listed as |
| record specifies a dela he 90th day after the | | | an effective | time, at 12:01 | a.m. on the ea | arlier o |
| ed | | 2021 | _ · | | | |
| | 1.1 | 0 ~ | | | | |
| | | 100 | * • | e of a member | | - |

Page 3 of 3

Filing Fee: \$25.00