

L14000091690

(Requestor's Name)

(Address)

(Address)

(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



800263478828

800263478828  
09/08/14--01041--006 \*\*30.00

FILED  
2014 SEP -8 PM 12:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 15 2014

T CLINE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ANNEHARY'S MAID SERVICE LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANNA MARIA KOVACS  
Name of Person

ANNEHARY'S MAID SERVICE LLC  
Firm/Company

360 NE 30TH CT  
Address

POMPANO BEACH, FL 33064  
City/State and Zip Code

ANNEHARYCLEANING@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

FILED  
2014 SEP -8 PM 12:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

ANNA MARIA KOVACS at (813) 476 9728  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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:**  
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

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

ANNEMARY'S MAID SERVICE LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2014 SEP - 8 PM 2:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on JUNE 09, 2014 and assigned  
Florida document number 114000091690.

This amendment is submitted to amend the following:

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

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:

**(Principal office address MUST BE A STREET ADDRESS)**

340 NE 30TH CT  
POMPANO BEACH, FL 3306H

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

340 NE 30TH CT  
POMPANO BEACH, FL 3306H

**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:

New Registered Office Address:

340 NE 30TH CT  
*Enter Florida street address*

POMPANO BEACH, Florida 3306H  
*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>
AMBR	ANNAMARIA KOVACS	340 NE 30TH CT POMPANO BEACH, FL 33068	<input checked="" type="checkbox"/> Add
		701 E FLETCHER AVE TAMPA, FL 33612	<input checked="" type="checkbox"/> Remove
AMBR	ANDRAS BREZNYAN	340 NE 30TH CT POMPANO BEACH, FL 33068	<input checked="" type="checkbox"/> Add
		701 E FLETCHER AVE TAMPA, FL 33612	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2021 SEP 8 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 SEPTEMBER 04, 2014.

\_\_\_\_\_  
Signature of a member or authorized representative of a member

ANNAMARIA KOVACS  
Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 SEP -8 PM 12:55

FILED