## 114000144254

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PICK-UP WAIT MAIL
(Business Entity Name)
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## **COVER LETTER**

SUBJECT:	Name of Lin	nited Liability Company		
	Amendment and fee(s) are sub			
	CAROLINA PINEIRO	J		
	ITAX SERVICES LLC	Name of Person		
,	16300 SW 137TH AVE #	Firm/Company		
	MIAMI. FL 33177	Address	<u>, ,</u>	P 7
	CAROLINA@ITAX-SERV			<u>-:</u>
	E-mail address: (	to be used for future annual repo	rt notification)	
For further information c	concerning this matter, please c	all:		دي رن
CAROLINA PINEIRO		305 790-43	36	تُ
Name o	f Person	at () Area Code E	Daytime Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Certified	e of Status &
MAIL	ING ADDRESS:	STREET/CO	OURIER ADDRESS:	

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

Registration Section Division of Corporations

TO:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HAX SERVICES LLC			
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)		
he Articles of Organization for this Limited Liability Colorida document number L14000144254	ompany were filed on	and a	ssigned
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limit	ted liability company here:		
he new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or	the abbreviation "	L.L.C."
nter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDR	ESS)		
		. e75	
		: :	***
nter new mailing address, if applicable:		:	
failing address MAY BE A POST OFFICE BOX)		್ಷ =	. *
runng usuress			1
			-
. If amending the registered agent and/or regist egistered agent and/or the new registered office addr	ered office address on our records, <u>e</u> <u>ess here</u> :	• •	e of the
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	imer i wida si eel didress		
	, Floric	da Zip Code	
	Cuy	zip Code	<u> </u>

## 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JON PINEIRO	16300 SW 137TH AVE # 118 MIAMI, FL 33177	Add
			Remove
			Change
<u>_</u>			
			□ Remove
			: Change
	<del></del>		Add ]
		<u> </u>	Remove
			□ Change
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			Change
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			Change

CHANGE HAS ALREADY BEEN MADE WITH IRS	
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fective date, if other than the date of filing:	(optional)
n effective date is listed, the date must be specific and cannot be prior to date of filing or tee. If the date inserted in this block does not meet the applicable statutory filing the date inserted in this block does not meet the applicable statutory filing the date inserted in this block does not meet the applicable statutory filing the date inserted in this block does not meet the applicable statutory filing the date in	more than 90 days after filing.) Pursuant to 605, ng requirements, this date will not be liste
cument's effective date on the Department of State's records.	
record energifies a delayed offective data but ask as affective	N
record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	time, at 12:01 a.m. on the earlie
10.08.2018	
ted	
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00