

Division of Corporations

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**L15000013563**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H15000249634 3)))



H15000249634ABC1

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : RC TAX SERVICE LLC  
Account Number : 120140000083  
Phone : (407) 932-0040  
Fax Number : (407) 520-5473

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

Email Address: JOE.PROFESSIONAL.CLEANINGS@HOTMAIL.COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
A PLUS SERVICES USA LLC**

Certificate of Status	0
Certified Copy	0
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TALLAHASSEE, FL 32399OCT 20 2015  
J. HARRIS

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Corporate Filing Menu

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**COVER LETTER**

HIS0002496343

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** A PLUS SERVICES USA 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:

JAIME PENARANDA

Name of Person

A PLUS SERVICES USA LLC

Firm/Company

2001 TIZWELL CIR. APT 1512

Address

ORLANDO, FL 32837

City/State and Zip Code

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

For further information concerning this matter, please call:

JAIME PENARANDA

at ( 407 )

600-9665

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**

H150002496343

A PLUS SERVICES USA 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 01/22/2015 and assigned  
Florida document number L15000013563

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**Enter new mailing address, if applicable:**

(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:

New Registered Office Address:

*Enter Florida street address*

City, Florida 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 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>	<u>Type of Action</u>
VP	VANESSA MENDOZA	1921 STABLE DR. APT 207.	<input type="checkbox"/> Add
		ORLANDO, FL 32837	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
OMGR	EDWIN ROJAS	1921 STABLE DR. APT 207	<input type="checkbox"/> Add
		ORLANDO, FL 32837	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

HIS000 2496343

SECRET  
APT 207  
TALLAHASSEE FLORIDA  
HIS000 19  
HIS000 609

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

H150002496343

FILED  
2015 OCT 19 AM 8:09  
CLERK OF SUPERIOR COURT  
TALLAHASSEE FLORIDA

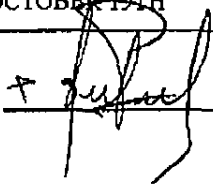
**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated OCTOBER 19TH, 2015



Signature of a member or authorized representative of a member

JAMES PENLAND

Typed or printed name of signee