

45 0000 23729

(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



500439777715

11 19 04-6. 217-64.. w.df.ff

FILED
2024 NOV 19 PM 3: 05
SECRETARY OF STATE

COVER LETTER

Э:

Registration Section Division of Corporations

P&P ONE SERVICES, LLC JBJECT: Name of Limited Liability Company ne enclosed Articles of Amendment and fee(s) are submitted for filing. ease return all correspondence concerning this matter to the following: PIERO V PIZZIMENTI Name of Person P&P ONE SERVICES, LLC Firm/Company 310 BLANDING BLVD. Address ORANGE PARK, FL 32073 City/State and Zip Code E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: 904 **ERO V PIZZIMENTI** 601-8428 Daytime Telephone Number Name of Person iclosed is a check for the following amount: □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, □ \$30.00 Filing Fee & 1 \$25.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: **Mailing Address:** Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) ability Company)			
he Articles of Organization for this Limited Liability Company orida document number L15000023729	were filed on 02/09/2015	and assigned		
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limited liab	ility company here:			
e new name must be distinguishable and contain the words "Eimited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."		
ater new principal offices address, if applicable:				
'rincipal office address MUST BE A STREET ADDRESS)		ZOZIL NOV		
iter new mailing address, if applicable: *Tailing address MAY BE A POST OFFICE BOX*)		TIS PROPERTY OF STANKS SEED.		
If amending the registered agent and/or registered office	address on our records, <u>enter th</u>	F 99		
ent and/or the new registered office address here:				
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	Florida			
	City	Zip Code		

¿ Registered Agent's Signature, if changing Registered Agent:

reby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ag filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability pany has been notified in writing of this change.

It Changing Registered Agent, Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

IGR = Manager MBR = Authorized Member

<u>itle</u>	Name	Address	Type of Action
GRM	MICACCHIONI. GIANPIER	310 BLANDING BLVD.	□Add
		ORANGE PARK, FL 32073	
			Change
			🗖 Add
			□ Remove
			Change
			🗆 Add
			🗆 Add
			Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			©Change

-					
		-			<u> </u>
				· -	<u></u>
				<u></u>	
			······································		
					<u>_</u> _
					
			• • • • •		
					
				·	
					· ·
			,	·· -	
					
		<u></u>			
	• • • • • • • • • • • • • • • • • • • •				
ation data. If athorathorathoration do				tantianals	
ctive date, if other than the dateffective date is listed, the date must be fig. If the date inserted in this block iment's effective date on the Depart	specific and cannot be p does not meet the ap	prior to date of fil plicable statute	ing or more than 90	(days after filing.) P	ursuant to 605,020 ill not be listed a
ord specifies a delayed effective d filed.	ate, but not an effecti	ve time, at 12:0	H a.m. on the ear	lier of: (b) The (90th day after the
NOVEMBER 13	2024		1		
u		THE S			
Si	znature of a member	authorized regres	sentative of a mem	ner	
	/ /	_			