# L500041700

(Re	questor's Name)	
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JUN 11 2015

S. YOUNG

## COVER LETTER

SUBJECT:	Fast Services	s 4 You LLC				
SUBJEC1:	Name of Limi	ted Liability Company	<del></del>			
The enclosed Articles of Am	endment and fee(s) are subr	nitted for filing.				
Please return all corresponde	nce concerning this matter t	to the following:				
	]	Paula Elena Clemente				
		Name of Person		•		
	F	ast Services 4 You LLC				
		Firm/Сотралу		-		
		6141 SW 8th Street			<b>نا</b> دـــ	
		Address				
	Miami-FL 33144  City/State and Zip Code		RY OF ST	-9		
				<u> </u>		
<u>-</u>		none			6h th 14d	
	E-mail address: (t	o be used for future annual report noti	fication)		Φ	
For further information conc	erning this matter, please ca	dl:				
Paula Elena C	Clemente	786 720-7191 at ()				
Name of Pe	erson	Area Code Daytim	e Telephone Number	r		
Enclosed is a check for the f	ollowing amount:					
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Fi Certifica Certified (additional	ite of Sta I Copy	atus &	

MAILING ADDRESS:

**Registration Section** 

**Division of Corporations** 

TO:

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

· FAST S	SERVICES 4 YOU LLC	
(Name of the Limited Liah (A Flor	illity Company as it now appears on o ida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability	Company were filed on 03/06/20	and assigned
Florida document number L15000041700	·	
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
n/a		
he new name must be distinguishable and contain the words "L	imited Liability Company," the designal	
Enter new principal offices address, if applicable:	same above	न्तु ज
<u>Principal office address MUST BE A STREET ADI</u>	DRESS)	禁刑 皇 五
		55 人 厂
		mo - H
Enter new mailing address, if applicable:	same above	FE B
Mailing address MAY BE A POST OFFICE BOX)		<b></b>
		٠٠٠ 
B. If amending the registered agent and/or reg egistered agent and/or the new registered office ad		records, enter the name of the
	Dealer Dealer City	
Name of New Registered Agent:	Paula Elena Clemente	
New Registered Office Address:	6141 SW 8th Street	
	Enter Florida stre	eet address
	Miami	, Florida <sup>33144</sup>
	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 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
MGRM	JANET R. VERGARA	6141 SW 8th Street	
•		Miami FL 33144	■ Remove
		<del></del>	□ Change
MGRM	PAULA ELENA CLEMENTE	6141 SW 8th Street	■ Add
		Miami FL 33144	□ Remove
			Change
			Removed
			Change  ☐ Change  ☐ Add
			□ Remove
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ctive date, if other than the effective date is listed, the date muse. If the date inserted in this bl	st be specific and cannot be prior	to date of filing or more than	(optional) 90 days after filing.) Pursuant to 605 ements, this date will not be list
ment's effective date on the D	epartment of State's records.	aose statutory rinnig requir	entents, this date will not be list
ecord specifies a delayed e 90th day after the rec	l effective date, but no ord is filed.	t an effective time, a	at 12:01 a.m. on the earli
4th of June	2015		
d	,	<u> </u>	
	- C		
	Signature of a member or author	rived reference of a second	mber

Page 3 of 3

Filing Fee: \$25.00



# **Detail by Officer/Registered Agent Name**

#### Florida Limited Liability Company

**FAST SERVICES 4 YOU LLC** 

#### Filing Information

**Document Number** 

L15000041700

FEI/EIN Number

NONE

**Date Filed** 

03/06/2015

Effective Date

03/06/2015

State

FL

**Status** 

**ACTIVE** 

#### Principal Address

6141 SW 8TH STREET MIAMI, FL 33144

#### **Mailing Address**

6141 SW 8TH STREET MIAMI, FL 33144

#### Registered Agent Name & Address

VERGARA, JANET R 6141 SW 8TH STREET MIAMI, FL 33144

### Authorized Person(s) Detail

#### Name & Address

#### Title MGRM

VERGARA, JANET R 6141 SW 8TH STREET MIAMI, FL 33144

#### **Annual Reports**

No Annual Reports Filed

#### **Document Images**

03/06/2015 -- Florida Limited Liability

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