

# L15000053863

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

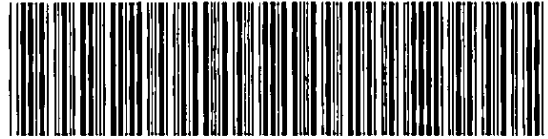
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2018 AUG 14 PM 4:03  
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TALLAHASSEE, FL

WHS  
8-22-18

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: A & M SERVICIOS LATINOS, 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:

RAMON RIVERA

Name of Person

IPS SERVICES, INC.

Firm/Company

339 6TH AVE WEST

Address

BRADENTON, FL 34205

City/State and Zip Code

INFO@GO-IPS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAMON RIVERA

at (941) 747-4940

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**

A & M SERVICIOS LATINOS, 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 03-26-15 and assigned  
Florida document number L15000053863.

This amendment is submitted to amend the following:

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

A & M SERVICIOS LATINOS, LLC

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)**

339 6TH AVE WEST

BRADENTON, FL 34205

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

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

339 6TH AVE WEST

BRADENTON, FL 34205

**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:

MENDOZA, PEDRO DE LA CRUZ

New Registered Office Address:

339 6TH AVE WEST

Enter Florida street address

BRADENTON

City

Florida

State

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.*

✓

Pedro Mendoza

**If Changing Registered Agent, Signature of New Registered Agent**

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TALLAHASSEE, FL

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>
MGR	Mendoza, Pedro De La Cruz	339 6TH AVE WEST	<input type="checkbox"/> Add
		BRADENTON, FL 34205	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Mendoza, Pedro	335 6th Ave West	<input type="checkbox"/> Add
		Bradenton, FL 34205	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mendoza, Roberto	339 6th Ave West	<input checked="" type="checkbox"/> Add
		Bradenton, FL 34205	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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

N/A

E. Effective date, if other than the date of filing: 08-10-18 (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 August 10, 2018

✓ Pedro Mendoza

Signature of a member or authorized representative of a member

Pedro De La Cruz Mendoza

Typed or printed name of signer

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