115000 156395

(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: Correction Per Conversation With Gail Parassam 4/8/2018 K5
W18-47814 Sign. Office Use Only



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JUN 8 2018

COVER LETTER

Division of Co	rporations		
GAIL PA		OVATION AND BUILDING SERV	VICES
SUBJECT:	Name of Limi	ited Liability Company	
		,	
The enclosed Articles of	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	GAIL PARASRAM		
		Name of Person	
	UNISON RENOVATION	AND BUILDING SERVICES	
		Firm Company	
	15201 E WATERFORD D	R	
		Address	
	DAVIE, FLORIDA 33331		
		City/State and Zip Code	
	parasram10gail@gmail.con	i to be used for future annual report notif	
			icanon)
For further information	concerning this matter, please co	all:	
GAIL PARASRAM		954 805 6212 at ()	
Name	of Person	at () Area Code Daytime	Telephone Number
Carlandina abade for	the Collegeian amount		
Enclosed is a check for	-		D 040 00 100 10
□ \$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

TO:

Registration Section

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

FILED

18 JUN -8 PH 3:58

GAIL A PARASRAM UNISON RENOVATION & BUILDING SERVICES

(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 C	ompany were filed on 9/14/20	and assigned
Florida document number 1.15000156395	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
UNISON BUILDING SERVICES LLC		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	 	
(Principal office address MUST BE A STREET ADDR	RESS)	·
Enter new mailing address, if applicable:	<u>-</u>	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		er records, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida	
	Enter Florida	street autress
	Car	Florida
	Сиу	z.ip Code
New Registered Agent's Signature, if changing Registere	d 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>	Name	Address	Type of Action
MGR	SCARLETT PARASRAM	15201 E WATERFORD DR. DAV	■ Add
			☐ Remove
			☐ Change

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			O Ade To Manager
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	MAN 7714 20	18	
Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	block does not meet the applicable	date of ming of more than word	(optional) ys after filing.) Pursuant to 605.0207 (3)(its. this date will not be listed as the
the record specifies a delaye) The 90th day after the re		an effective time, at 12	2:01 a.m. on the earlier of:
Dated MAY 14TH	2018		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

May 18, 2018

UNISON RENOVATION & BUILDING SERVICES LLC GAIL PARASRAM 15201 E WATERFORD DR. **DAVIE, FL 33331**

SUBJECT: UNISON RENOVATION & BUILDING SERVICES LLC

Ref. Number: L15000156395

We have received your document for UNISON RENOVATION & BUILDING SERVICES LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Salv Regulatory Specialist II

Letter Number: 518A00010445

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