

L15000182704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

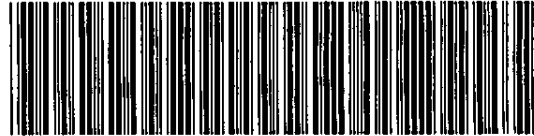
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200278587432

11/05/15--01007--012 **25.00

L15-182704
Amend

FILED
15 NOV 19 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 19 2015

N. CAUSSEAU

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AJ Business Service 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:

Alejandrina Jimenez
Name of Person

AJ Business Service LLC
Firm/Company

3830 S. Orlando Dr, Sanford, FL 32773
Address

Sanford, FL 32773
City/State and Zip Code

nunezsanchez@claro.net.do
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alejandrina Jimenez at (407) 284-2259
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 6, 2015

ALEJANDRINA JIMENEZ
AJ BUSINESS SERVICE LLC
3830 S. ORLANDO DR.
SANFORD, FL 32773

SUBJECT: AJ BUSINESS SERVICE LLC
Ref. Number: L15000182704

We have received your document for AJ BUSINESS SERVICE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

You must list the address/city of the new "AMBR."

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.

Nanette Causseaux
Regulatory Specialist II Supervisor

Letter Number: 215A00023539

**TO
ARTICLES OF ORGANIZATION
OF**

AS Business Service 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 _____ and assigned
Florida document number L15000180704.

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)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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:

Alexandrina Jimenez

New Registered Office Address:

X 3830 S Orlando Dr.

Enter Florida street address

X Sanford

City

Florida 32773

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

MGR = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
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AMBR	Alexandra Gentry	38305 Orlando Dr.	<input checked="" type="checkbox"/> Add
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		Santa Fe 32773	<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
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			<input checked="" type="checkbox"/> Remove
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FILED
15 NOV 19 AM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGR Alex Gentry MRS

AMBR Alexandra Gentry

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15 NOV 19 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

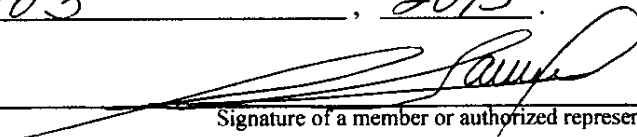
E. Effective date, if other than the date of filing: _____ (optional)

(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 11/03, 2015.



Signature of a member or authorized representative of a member

Alejandrina Jimenez

Type or printed name of signer