L15000192341

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COVER LETTER

TO: Registration Section

Division of C	Corporations		
	Services, LLC	1	
SUBJECT:	Name of Lirr	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	posited for filing	
		-	
Please return all corre	spondence concerning this matter	to the following:	
	Juana Zurita		
		Name of Person	
	Lume's Services, LLC	1	
		Firm/Company	
	11750 SW 18 St Apt 501		
		Address	
	Miami Florida 33175		2011 JUL 31 SECRETAR TALLAHASS
	lumeservices115@gmail.cc	City/State and Zip Code	CHETARY C
	• • •	to be used for future annual report notifi	ication)
For further informatio	n concerning this matter, please c	ali:	100 P. J.
Juana Zurita		786 877-7882	Dr. E
Nam	e of Person		Telephone Number
Enclosed is a check fo	r 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)
Reg Divi P.O.	ILING ADDRESS: istration Section sion of Corporations . Box 6327	STREET/COURIE Registration Section Division of Corpora Clifton Building	ı utions
ı allı	ahassee, FL 32314	2661 Executive Cer	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lume's Services, LLC			
(Name of the Lim	ted Liability Compa (A Florida Limited I	ny as it now appears on our reco Liability Company)	ord <u>s.</u>)
The Articles of Organization for this Limited I Florida document numberL15000192341	iability Company	were filed on 11/13/2015	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "I	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		11750 SW 18 St Apt 501	
		Miami FL 33175	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11750 SW 18 St Apt 501 Miami FL 33175	THE BILL OF
B. If amending the registered agent and registered agent and/or the new registered of			rds, enter the name of the new
Name of New Registered Agent:	Juana Zurita		
New Registered Office Address:	11750 SW 18 S	·	
		Enter Florida street ada	lress
	Miami	•	Florida 33175
		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.

4-JUNIA J. JUNITA 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
P	Juana Leiva	13841 SW 105 ST	Add
		Miami FL 33186	Remove
		 	□ Change
MRG	NORKYS E HIDALGO	10300 SW 40 ST APT 208	
		MIAMI, FL 33165	■ Remove
			Change
MRG	Juana Zurita	11750 SW 8 St Apt 501	■ Add
		Miami FL 33175	☐ Remove
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Effective date, if other than fan effective date is listed, the date Note: If the date inserted in the document's effective date on t	e must be specific and is block does not r	l cannot be prior to neet the applica		ore than 90 days aft		
ne record specifies a dela The 90th day after the			an effective ti	me, at 12:01	a.m. on the earli	ier o
Dated		. 2017	_ ·			
,	Jun Ph Signature of a	T Juni	ta			

Page 3 of $\frac{1}{3}$

Filing Fee: \$25.00