

L15000204287

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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15 DEC 14 PM 5:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 15 2015  
S. YOUNG

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** WEEKS RAGS TO DRYWALL, 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:

Alejandro Belmonte

Name of Person

Business Services USA LLC

Firm/Company

1528 W Warm Springs RD Unit 100

Address

Henderson NV 89014

City/State and Zip Code

sellersdept@gmail.com

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

For further information concerning this matter, please call:

Maya T

310

455-6675

at ( )

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

FILED  
15 DEC 14 PM 5:21  
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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

WEEKS RAGS TO DRYWALL, 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 12/08/2015 and assigned  
Florida document number L15000204287.

This amendment is submitted to amend the following:

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

Weeks Rags to Riches Drywall, 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)**

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

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

**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:

New Registered Office Address:

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_  
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>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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TALLAHASSEE, FL

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TALLAHASSEE, FLORIDA

**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.

Dated 12 December, 2015

Olin Weeks

Signature of a member or authorized representative of a member

Obie Weeks / AMBR

Typed or printed name of signee

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L15000204287  
FILED 8:00 AM  
December 08, 2015  
Sec. Of State  
tbrown

**Article I**

The name of the Limited Liability Company is:

WEEKS RAGS TO DRYWALL, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:

312 CENTER ST  
AUBURNDALE, FL. 33823

The mailing address of the Limited Liability Company is:

312 CENTER ST  
AUBURNDALE, FL. 33823

**Article III**

The name and Florida street address of the registered agent is:

OBIE WEEKS  
312 CENTER ST  
AUBURNDALE, FL. 33823

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: OBIE WEEKS

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TALLAHASSEE, FLORIDA

## Article IV

The name and address of person(s) authorized to manage LLC:

Title: AMBR  
OBIE WEEKS  
312 CENTER ST  
AUBURNDALE, FL. 33823

L15000204287  
FILED 8:00 AM  
December 08, 2015  
Sec. Of State  
tbrown

Signature of member or an authorized representative

Electronic Signature: OBIE WEEKS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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TALLAHASSEE, FLORIDA