L15000212360

(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ee)
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Certified Copies	_ Certificates	of Status
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JALLAHASSEE, FLOWING

PFFECTIVE DATE

NOV 04 2016 S. YOUNG

COVER LETTER

		stration Sec sion of Corp				
SUBJEC			BOOKKEEPING & TAX SE	ERVICES LLC		
JODJEC	. 1:		Name of Lin	nited Liability Company		
The encle	osed	Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please ret	turn :	all correspon	ndence concerning this matter	to the following:		
			CHRISTINE AFOLABI			
				Name of Person	-,,	
			TROPIFLO BOOKKEEP	ING & TAX SERVICES LLC		
				Firm/Company		
			PO BOX 212815		5	ACC.
				Address		
ROYAL PALM BEACH, FLORIDA 33421			ROYAL PALM BEACH,	FLORIDA 33421	ယ်	
				City/State and Zip Code	Address RIDA 33421 Ty/State and Zip Code used for future annual report notification) 314 Area Code Daytime Telephone Number 3555.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) STREET/COURIER ADDRESS:	
			CHRISSYB75@YAHOO.		Tantion 1	ري ري
For furthe	er inl	formation co	ncerning this matter, please e	•	eadon)	0
CHRIST	INE	AFOLABI				
		Name of	Person		e Telephone Number	
Enclosed	is a	check for the	e following amount:			
\$25.0	90 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	• •	Certificate of Status & Certified Copy	
			NG ADDRESS: tion Section	STREET/COURI Registration Sectio		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Non-14-12-12-12-12-12-12-12-12-12-12-12-12-12-			
(Name of the Limited Liability Company of A Florida Limited Liab	is it now appearing the litty Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Company we	re filed on	12/23/2015	and assigned
Florida document numberL15000212360	_		`
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	company l	<u>nere</u> :	
MOBILE BOOKKEEPING & TAX SERVICES LLC			
The new name must be distinguishable and contain the words "Limited Liability of	Company," the	designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:			5 Eg
(Principal office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·		8 10
			3 公子
_		- 	3 7
Enter new mailing address, if applicable:			بي مي ن مي
			<u></u>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		on our records, <u>en</u>	ter the name of the nev
		, Florida	1
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office adcompany has been notified in writing of this change.	formance o vided for in	f my duties, and I c Chapter 605, F.S.	am familiar with and Or, if this document is

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 auucu or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remove
			☐ Change
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ffective date, if other than the date of filing:  NOVEMBER 7, 2016  (optional)  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 66 lote:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be incurrent's effective date on the Department of State's records.  The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl the polith day after the record is filed.  Signature of a member or authorized representative of a member  Typed or publied name of signes.	—
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The 90th day after the record is filed.	
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\ T\A\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00