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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:	Registration Secti Division of Corpo			
CUDIE	or.	Good Servi	ices LLC	
SUBJE	C1:	Name of Lim	ited Liability Company	
The enc	losed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspond	ence concerning this matter	to the following:	
		Michae	Name of Person	
		(2009 S	ervices LLC Firm/Company	
			Firm/Company	
		2344 Jays	Address	
		_ Jacksonvi	City/State and Zip Code 25 4 1 Fe @ mail. C to be used for future annual report notific	<u>, 8</u>
		moodservice	es 4 life & checil.	an
	,	E-mail address: (1	to be used for future annual report notific	cation)
For furt	her information con-	cerning this matter, please ca	all:	
	1ichael Go	od	at (<u>904</u>) <u>237-</u> Area Code Daytime	8809
	Name of F	erson	Area Code Daytine	Telephone Number
Enclose	d is a check for the t	ollowing 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

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Dervices LL	\sim	
(Name of the Limited Liab (A Flor	oility Company as it now appear ida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Florida document numberL\6000\13783	Company were filed on /	1pr. 17.	<u>∂∂∖</u> and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the li</u>	mited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the words "L	imited Liability Company," the de	esignation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:			·
(Principal office address MUST BE A STREET ADI	DRESS)		.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac	+ -	our records, en	ter the name of the
Name of New Registered Agent:			
New Registered Office Address:		<u> </u>	<u> </u>
	Enter Flor	ida street address	
	City	Florida	Zip Code
	City		zap Cixie

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 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 fige, name, and address of each person being at or removed from our records: MGR = Manager AMBR = Authorized Member <u>Address</u> Type of Action Title Name 7437 Laura St North RAdd Sedrick Price AMBR ☐ Remove ☐ Change 1124 Woodruff Ave April AMBR Jared Rousa Jacksonville, FL 32205 ☐ Remove □ Change ☐ Add □ Remove ☐ Change □ Add ☐ Remove _□ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove

_□ Change

-	
Fffective	date, if other than the date of filing: (optional)
If an effective	ve 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 605.020
	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a 's effective date on the Department of State's records.
uocumem	s effective date on the Department of State's records.
	de la constitución de la constit
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of th day after the record is filed.
Dated	Much Jo. 2019. Signature of a member or authorized representative of a member
	Much Hord
	Signature of a member or authorized representative of a member
	Michael Good
	THENMEL JUGA

D. If amending any other information, effect change(s) here: (Anach daditional sheets, if necessary.)

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Filing Fee: \$25.00