## L16000130902

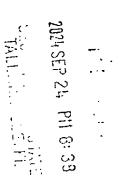
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
(Basament ramber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600436977586

09/24/24--01020--020 \*\*25.00





## **COVER LETTER**

TO:

	egistration Se livision of Corp						
0.10.10.07		'S SERVICES, LLC					
SUBJECT	Name of Limited Liability Company						
The enclos	sed Articles of .	Amendment and fec(s) are sub	mitted for filing.				
Please retu	ırıı all correspo	ndence concerning this matter	to the following:				
		MARCELO MUNGUIA					
			Name of Person				
		MUNGUIA'S SERVICES	, LLC				
			Firm/Company	V			
807 SATIN LEAF CIRCLE							
		Address					
OCOEE, FL 34761							
		City/State and Zip Code					
		ALMANZATAXI@YAHO		415			
			to be used for future annual report no	инсаноп)			
For further	r information e	oncerning this matter, please c	all:				
MARCEL	.O MUNGUIA		407 446-4815 at ()				
	Name o	f Person	Area Code Dayti	me Telephone Number			
Enclosed i	is a check for th	ne following amount:					
€ \$25.0	0 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)			
<u>I</u> -	<u>dailing Addres</u> Registration S Division of C	Section	Street Address: Registration S Division of Co				
F	P.O. Box 632 Fallahassee, I	7	The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810			

Tallahassee, FL 32303

## TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MUNGUIA'S SERVICES, LLC (Name of the Limited Liability Company as it now appears on our recoi (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{07/11/2016}{}$ 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 "LLC." 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 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>	Name	Address	Type of Action
MGRM	MUNGUIA, CELIDA	807 SATIN LEAF CIRCLE	
		OCOEE, FL 34761	<b>=</b> n
			□ Change
			□ Add
			Remove
			Change
			□Add
			□Remove
			Change
			□Remove
			□ Change
			□Remove
		_	□Add
			□Remove
			□ Change

_	
_	
_	
_	
_	
_	
_	
-	
_	
_	
n eff ste:	ve date, if other than the date of filing:
ecor is fil	d 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 ed.
ited	SEPTEMBER 16 2024
	N (M)
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00