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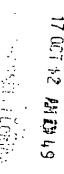
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Special Instructions to Filing Officer:

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## **COVER LETTER**

10:	Registration Se Division of Cor			
SHRIE	СТ:		TENANCE SERVICE LLC	
			ited Liability Company	
The enc	closed Articles of	Amendment and fee(s) are sub	nitted for filing.	
Please r	return all correspo	ondence concerning this matter	to the following:	
			ROOSEVELT RAGIN	RAGIN  On  CE SERVICE LLC  By  ERRACE  GOO7  Code  AHOO.COM  Innual report notification)  498-8143  Daytime Telephone Number  Gee & Certificate of Status & Certificate of Status &
		<del></del>	Name of Person	<del></del> ,
		RAG	IN MAINTENANCE SERVICE L	LC
			Firm/Company	
			1527 SPRUCE TERRACE	
			Address	· · · · · · · · · · · · · · · · · · ·
			TAMPA, FL 33607	
			City/State and Zip Code	
			SEVELT1969@YAHOO.COM	
		E-mail address: (1	o be used for future annual report notif	fication)
For furt	her information c	oncerning this matter, please ca	ill:	
ROOSEVELT RAGIN		609 498-8143 at ()		
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclose	d is a check for th	ne following amount:		
\$25	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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our records, enter	the nante of the
	·-
da street address	
Florida	Zip Code
	on our records.)  09/07/2016  re: signation "LLC" or the a

## 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>	Type of Action
MGR	Georgina Slaughter	6851 Forrest St	Add
		Hollywood, FL 33024	■ Remove
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<u>ote:</u> ocum	If the date inserted in this block does not meet the applicable statutory filing requirements, this date ent's effective date on the Department of State's records.	will no	t billisted a
rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. 90th day after the record is filed.		
nted _	OCT 10 2017		
	$\ell$ , $\ell$ $\sim$		
	Signature of a member or althorized representative of a member		

Page 3 of 3

Filing Fee: \$25.00