L16000174276

(Requestor's Name)	
(Address)	
(Address)	RECE JUL 0 6
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	ري. ري
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Received 08/0 5	
Office Use Only S, C -	
08/09/21	



49220

2021

6D



July 27, 2021

HARRY L MYERS III 600 W. DR. MARTIN LUTHER KING JR BLVD PLANT CITY, FL 33564

SUBJECT: PROTECTIVE SECURITY SERVICE LLC

Ref. Number: L16000174276

We have received your document for PROTECTIVE SECURITY SERVICE LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Summer Chatham OPS

Letter Number: 921A00017465

(1)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Protective Security Service, LLC			
(Name of the Limited	Liability Company as it now appear Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liab Florida document number L 16000174276	oility Company were filed on	9/19/2016	_and assigned
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of t	he limited liability company he	<u>re</u> :	
N/A			
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the de	esignation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicab			
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office address on our re nere:	cords, <u>enter the name o</u>	f the new registered
Name of New Registered Agent:	Sheri A Myer		
New Registered Office Address:	600 W Dr Martin Luther King Jr	Blvd da street address	5 11
	Plant City	Florida3356	3D 17
	City	, Florida	Code .
New Registered Agent's Signature, if changing Reg	istered Agent:		2

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.

W 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>	Address	Type of Action
MGR	Sheri A Myer	8711 Charming Knoll Ct. Tampa, FL 33635	🗏 Add
			□Remove
			Change
MGR	James Snead	3956 Jarred Lane, Lakeland FL 33810	[]Add
			■Remove
			□ Change
			□Add
			□Remove
		<i>→</i>	Change €
			aEAdd
			Remove
			∷ □Change
			□ Add
			□Remove
			Change
			□ Add
			□Remove
			□ Change

70		
7		
		4 D
		
		(D
		(D
·· <i>.</i>		<u> </u>
	٠ 🛖	
	ניים	
	ا	· ~
		
	>	
	==	المسه
	20	
days after filir	ng.) Pursuant	to 605.0207 be listed as
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
rlier of: (b)	The 90th da	y after the
ber		
	0 days after fili ments, this da	(optional) 0 days after filing.) Pursuant ments, this date will not rlier of: (h) The 90th day

Filing Fee: \$25.00