

L160000190599

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

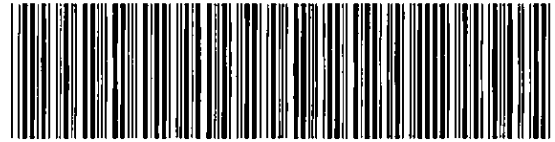
(Business Entity Name)

(Document Number)

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2023 SEP 22 PM 12:39

A. PARISHANI

OCT 07 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SERVITEC ORLANDO SECURITY SYSTEM LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juan Francisco Bolano Rodriguez

Name of Person

Servitec Orlando

Firm/Company

108 Zolfo Springs cort

Address

kissimmee, FL 34743

City/State and Zip Code

servitecorlando@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call.

Juan Francisco Bolano Rodriguez

407

9230839

Name of Person

at ()

Area Code

Daytime Telephone Number

Enclosed is a check for the following 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SERVITEC ORLANDO SECURITY SYSTEM LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 0/14/2016 and assigned
Florida document number 1.16000190599

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SERVITEC ORLANDO SECURITY SYSTEM & PROSERVICES MAINTENANCE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

108 Zolfo Springs cort

(Principal office address MUST BE A STREET ADDRESS)

Kissimmee FL 34743

Enter new mailing address, if applicable:

108 Zolfo Springs cort

(Mailing address MAY BE A POST OFFICE BOX)

Kissimmee FL 34743

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:

Juan Francisco Bolano Rodriguez

New Registered Office Address:

108 Zolfo Springs cort

Enter Florida street address

Kissimmee

Florida

34743

City

Zip Code

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>	<u>Type of Action</u>
MGR	Juan Francisco Bolano Rodriguez	108 Zolfo Springs cort Kissimmee FL 34743	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			2023 <input type="checkbox"/> Add
			2023 <input type="checkbox"/> Remove
			PI112339 <input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

2023 SEP 22 PM 12:39

E. Effective date, if other than the date of filing: _____ (optional)

(If 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated September 19, 2023

Juan Francisco B.R.

Signature of a member or authorized representative of a member

Juan Francisco Bolano Rodriguez

Typed or printed name of signee