

416000203975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

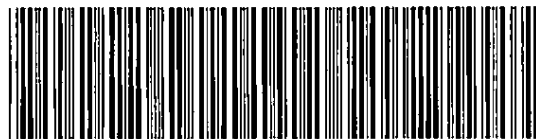
(Business Entity Name)

(Document Number)

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D SCOTT

OCT 20 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Clear Financial & Tax Services, 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:

Myrlande Joseph

Name of Person

Clear Financial & Tax Services, LLC

Firm/Company

2328 10th Avenue Suite 501G

Address

Lake Worth, FL 33461

City/State and Zip Code

clearfntservices@gmail.com

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

For further information concerning this matter, please call:

Myrlande Joseph

Name of Person

561
at (_____)_____
Area Code

926-6340

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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2017 OCT 19 P 3:28

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

Clear Financial & Tax Services, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 11/07/2016 and assigned
Florida document number L16000203975.

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 "L.L.C."

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) _____

2328 10th Avenue Suite 501G

Lake Worth, FL 33461

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:

Myrlande Joseph

New Registered Office Address:

2328 10th Avenue Suite 501G

Enter Florida street address

Lake Worth

City

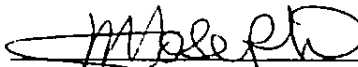
Florida

33461

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	Myrlande Joseph	2328 10th Avenue Suite 501G	<input type="checkbox"/> Add
		Lake Worth, FL 334611	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MRG	Anivain Marius	2328 10th Avenue Suite 501G	<input type="checkbox"/> Add
		Lake Worth, FL 33461	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Fenson Masse	6742 Forest Hill Blvd #347	<input type="checkbox"/> Add
		Greenacres, FL 33413	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
MAR 20 2019
CLERK OF DISTRICT COURT
JANUARY 2019

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated 10/14/2017

Signature of a member or authorized representative of a member

Typed or printed name of signee