LI7000220401

(Requestor	's Name)
(Address)	
, ,	
(Address)	
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Rusiness)	Entity Name)
(Dusiness)	Endty Name;
(Document	Number)
Certified Copies	Certificates of Status
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A. DUTLER SEP 29 2022

COVER LETTER

BJECT:			••
Name of Limited Liability Company			
enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
ase return all corresp	ondence concerning this matter	to the following:	
	Kristin Pizzuti		
		Name of Person	
	Protection Planning Service	es LLC	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	273 Bayou Circle		
		Address	
	Debary Fl 32713		
		City/State and Zip Code	
	Eval411@yahoo.com	o be used for future annual report notif	· · · · · · · · · · · · · · · · · · ·
further information	concerning this matter, please ca	·	icanony
stin Pizzuti		321 277-1729 at ()	
Name	of Person	Area Code Daytime	: Telephone Number
losed 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)

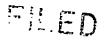
TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Protection Planning Services LLC

2022 JUN 28 PM 12: 52

(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 10/24/2017 Florida document number L17000220401 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Property Maintenance Partners LLC 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: SAMO (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

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.

City

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
			□Add
			□Remove
			□Change
		🗆 Add	
			□Remove
		□Change	
		□Add	
			□Remove
		□ Change	
			□Add
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			□Add
			□Remove
			Change

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E. Effectiv	re date, if other than the date of filing: (optional)
<u>Note:</u> 1	etive 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), if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
docume	nt's effective date on the Department of State's records.
c	
t the record ecord is file	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 d.
Dated _	6/22/22
	- Must I light
	Signature of a member or authorized representative of a member
	Kristin Pizzuti
	Typed or printed name of signee