Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000271226 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:		-4.00 =
	Division of Corporations	
	Fax Number : (850)617-6383	ES &
From:	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.	
	Account Number : I2 000 00000019	<u></u>
	Phone : (305)552-5973	
	Fax Number : (305)675-5944	100 -
		5 5
**Ent	er the email address for this business entity to be used for	HUTUPS -
	annual report mailings. Enter only one email address please.	** • • • • • • • • • • • • • • • • • •
•	Email Address:	_

O.P.A. PROFESSIONAL SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Help Corporate Filing Menu

Electronic Filing Menu

Articles of Amendment to LLC Articles of Organization of
O.P.A. Professional Services LL
The Articles of Organization for this Limited Liability Company were filed on 10/21/11 and assigned Florida document number 17000.22-3980.
This amendment is submitted to amend the following:
Remove: Hector A : Torreal ba
Espinoza
These articles of amendment were adopted on 9/17/18 Dated 9/17/18
Dated 9/17/18
CHUNDY TO
Signature of a member or authorized representative of a member Typed or printed name of signee
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing