

L17000 257296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

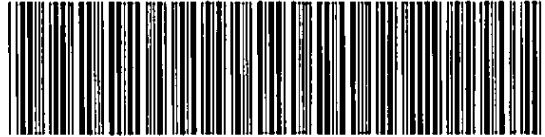
(Business Entity Name)

(Document Number)

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2018 NOV 30 P 7:55  
US DISTRICT COURT  
DISTRICT OF COLUMBIA

12/3/18 DS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 6, 2018

EDWIN HAY  
405 S FEDERAL HWY  
101-B  
DANIA, FL ~~33023~~ 33004

SUBJECT: EAGLE UNIVERSAL PROTECTIVE, SECURITY LLC  
Ref. Number: L17000257296

We have received your document for EAGLE UNIVERSAL PROTECTIVE, SECURITY LLC and your check(s) totaling \$45.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FL CORP, but your entity is a FL LLC. Please complete and return the enclosed blank form(s).

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) 245-6051.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 518A00022882

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2018 NOV 20 PM 10:41  
Name Removal

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Eagle Universal Protective, 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:

Edwin HAY  
Name of Person

Eagle Universal Protective, LLC.  
Firm/Company

405 S. Federal Hwy  
Address

DANIA, FL 33004  
City/State and Zip Code

edhay1@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edwin Hay at ( 954 ) 326-2076  
Name of Person 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/COURIER ADDRESS:

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

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MAY 20 PM 1:55

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

Eagle Universal Protective, Security 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 12-18-17 and assigned Florida document number 412000257296.

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)**

**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

Florida

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>
<u>COO</u>	<u>JAMES VINTEN JR.</u>	<u>621 S.W. 7<sup>th</sup> AV2</u>	<input type="checkbox"/> Add
		<u>Pembroke Pines</u>	<input checked="" type="checkbox"/> Remove
		<u>FL 33023</u>	<input type="checkbox"/> Change
<u>CFD</u>	<u>MELVIN JOHNSON JR.</u>	<u>3921 N.W. 186 ST.</u>	<input type="checkbox"/> Add
		<u>Miami Garden,</u>	<input checked="" type="checkbox"/> Remove
		<u>FL 33055</u>	<input type="checkbox"/> Change
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Add
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Remove
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Change
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Add
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Remove
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Change
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Add
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Remove
<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Change

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2011 JUN 30 PM 7:51

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED  
DATE 08-11-2011 BY 60322 UCBAW

**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.

Dated 11-21-18

Ed. King  
Signature of a member on

Signature of a member or authorized representative of a member

Edwin H. Ray  
Typed on pr

Typed or printed name of signee