

218000000405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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B FIGUEROA

FEB 19 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 2, 2018

GERARDO RAMIREZ  
26640 ROSEWOOD POINTE #204  
BONITA SPRINGS, FL 34135

SUBJECT: SWFL SERVICE SOLUTIONS, LLC  
Ref. Number: L18000000405

We have received your document for SWFL SERVICE SOLUTIONS, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P16000028460 FLORIDA SERVICES & SOLUTIONS INC.

Please return the corrected original and one copy of 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.

Brittany M Figueroa  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 618A00002307

CHANGE TO → **SYVIZ, LLC** *OR* Syviz, LLC  
EMAIL: GRAMIREZ@SYVIZ.COM *OR*  
239-352-1776

RECEIVED

FEB 14 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SWFL SERVICE SOLUTIONS, 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:

GERARDO RAMIREZ - CEO

Name of Person

SWFL SERVICE SOLUTIONS, LLC

Firm/Company

26640 ROSEWOOD POINTE DRIVE #204

Address

BONITA SPRINGS, FL 34135

City/State and Zip Code

<sup>A</sup>GRAMIREZ@SYVIZ.COM

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

For further information concerning this matter, please call:

GERARDO RAMIREZ

Name of Person

at ( 239 )

Area Code

352-1776

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)

☒ **ALREADY SENT**  
\$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

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

SWFL SERVICE SOLUTIONS, 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 01/02/2018 and assigned Florida document number L18000000405.

This amendment is submitted to amend the following:

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

SYVIZ, LLC

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

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DIVISION OF CORPORATIONS  
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**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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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 18 FEB 15 PM 2:02

DIVISION OF CONSTRUCTION  
18 FEB 14 PM 2:02

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DIVISION OF CORPORATIONS  
18 FEB 14 PM 2:02

(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:

(b) The 90th day after the record is filed.

Dated FEBRUARY 12, 2018.

\_\_\_\_\_ - MEMBER OF SWFL SERVICE SOLUTIONS, LLC  
Signature of a member or authorized representative of a member

GERARDO RAMIREZ - MEMBER OF SWFL SERVICE SOLUTIONS, LLC  
Typed or printed name of signee