

L18000002737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

n PRUCE
AUG 31 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2018

DOMINGO ABINADR, MBA, EA
AB MULTI SERVICES AND INCOME TAXES
1901 S JOHN YOUNG PKWY
KISSIMMEE, FL 34741

SUBJECT: FASTER PROS LLC
Ref. Number: L18000002739

We have received your document for FASTER PROS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Corporate Records Supervisor

Letter Number: 718A00016835

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TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FASTER PROS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Domingo Abinader, MBA, EA

Name of Person

AB Multi Services and Income Taxes

Firm/Company

1901S JOHN YOUNG PARKWAY

Address

Kissimmee, FL 34741

City/State and Zip Code

abmultiservices1@yahoo.com

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

For further information concerning this matter, please call:

Domingo Abinader

407

601-6524

at ()

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

2010 AUG 10 AM 10:15

2010 AUG 30 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2010

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

FASTER PROS 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 01/03/2018 and assigned
Florida document number 118000002739.

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: EVELIN TREJO-VELAZQUEZ

New Registered Office Address: _____

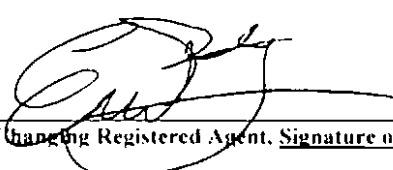
Enter Florida street address

_____, Florida

City

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

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TALLAHASSEE, FLORIDA

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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2018 AUG 30 PM 2:50
SECRETARY OF STATE
TALLAHASSEE-FLORIDA

Diagram 1: A horizontal line connects to a vertical line from the left, with a small vertical tick on the horizontal line.

Diagram 2: A horizontal line connects to a vertical line from the left, with a small vertical tick on the horizontal line.

Diagram 3: A horizontal line connects to a vertical line from the left, with a small vertical tick on the horizontal line.

Diagram 4: A horizontal line connects to a vertical line from the left, with a small vertical tick on the horizontal line.

Diagram 5: A horizontal line connects to a vertical line from the left, with a small vertical tick on the horizontal line.

E. Effective date, if other than the date of filing: _____ (optional)

(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)

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.

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 August 03 2018

Signature of a member

TREJO-VELAZQUEZ, EVELIN

Signature of a member or authorized representative of a member

Typed or printed name of signee