## N18000005166

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(City/State/Zip/Phone #)
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DIVISION OF CUMPORATION

T. MATTHEWS JUL 25 2022

## **COVER LETTER**

**Registration Section** 

Tallahassee, FL 32314

TO:

orporations		
ICK SECURITY SERVICES, LL	C.	
Name of Limi	ted Liability Company	
of Amendment and fee(s) are subt	mitted for filing.	
pondence concerning this matter t	to the following:	
IAN ILLYCH MARTINEZ	z, esq.	
	Name of Person	· · · · · · · · · · · · · · · · · · ·
BELLO & MARTINEZ, PI		
	Firm/Company	
2850 DOUGLAS ROAD, S	SUITE 303	
	Address	
CORAL GABLES FL 331:		
	City/State and Zip Code	<del></del>
		lication)
n concerning this matter, please or	ıll:	
INEZ, ESQ	305 442-7970 at ( )	
e of Person	Area Code Daytime	e Telephone Number
r the following amount:		
□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
n Section	Street Address: Registration Sec	
· · · · · · · · · · · · · · · · · · ·		-
	ICK SECURITY SERVICES, LL  Name of Limit of Amendment and fee(s) are subsequence concerning this matter  IAN ILLYCH MARTINEZ  BELLO & MARTINEZ, P  2850 DOUGLAS ROAD, S  CORAL GABLES FL 331.  imartinez@bmrlawgroup.co  E-mail address: (in concerning this matter, please callinez, ESQ  e of Person  r the following amount:  \$\square\$\$\$\$\$\$30.00 Filing Fee &	Name of Limited Liability Company  of Amendment and fee(s) are submitted for filing.  pondence concerning this matter to the following:  IAN ILLYCH MARTINEZ, ESQ.  Name of Person  BELLO & MARTINEZ, PLLC  Firm/Company  2850 DOUGLAS ROAD, SUITE 303  Address  CORAL GABLES FL 33134  City/State and Zip Code  imartinez@bimrlawgroup.com  E-mail address: (to be used for future annual report notal concerning this matter, please call:  INEZ, ESQ  of Person  at (  Area Code Daytime  The following amount:  S30.00 Filing Fee & Certified Copy  (additional copy is enclused)  Fess: In Section  Registration Section  Corporations  Street Address:  Registration Section  Corporations

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATIONS CHART OF STATE OF OF CORPORATION

22 MAY 23 AM 10: 18

## MAVERICK SCURITY SERVICES, 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 L		were filed on $\frac{01/05/2013}{2}$	and assigned
Florida document number L18000005166	·		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
N/A			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applied	cable:		
(Principal office address MUST BE A STREI		N/A	
-			<u> </u>
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or		address on our records.	enter the name of the new registered
agent and/or the new registered office addre	ss nere:		
No see a C.N. our Don't are all Assessed	N/A		
Name of New Registered Agent:	<del></del>		
New Registered Office Address:	<del></del>	Enter Florida stree	t u Muses
		City:	, Florida
Now Project and Assessed Company of the prince	Donistuuud toonte	•	24) 6.000
New Registered Agent's Signature, if changing			
I hereby accept the appointment as registere provisions of all statutes relative to the prop	ed agent and agr nev and complete	ee to act in this capacit nertormance of my du	ty. I further agree to comply with the ties, and I am familiar with and
accept the obligations of my position as regi	istered agent as <sub>l</sub>	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 conf	irm 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>	Address	Type of Action
MGR	GREENBACKS HOLDING, LLC.	333 PALERMO AVE	
-		CORAL GABLES FL 33134	■Remove
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			Remove
			Change
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n effective date is list. ter: If the date inse	ed, the date must be spo great in this block do	ecific and cannot be p	prior to date of tiling of	more than 90 days after	r filing.) Pursuant to 605 03 s date will not be listed
ument's effective	date on the Departm	nent of State's reco	ords		
i cord s <del>pe</del> cifi <mark>es a d</mark> e	layed effective date,	, but not an effecti	ve time, at 12.01 a.	n on the earlier of: (b	) The 90th day after t
is filed.					
. 05/16		2022			
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<u> </u>		1			
	Signat	arc of a member or	aufforized representa	ive of a member	
/ /	- 4				