L18000024422

(Requestor's Name)
_
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300308530453

02/05/18--01003--001 **25.00

RECEIVED FEB 0 2 2018

18 FEB - 2 AM 3: 50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

Division of Cor	porations		
SAFE SUBJECT:	PRO WASTE DISPOSAL LLC		
	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ondence concerning this matter t	o the following:	
		Michael I. Bernstein, Esq.	
		Name of Person	-
	The Bo	ernstein Law Firm	
		Firm/Company	
	305	0 Biscayne Boulevard, Suite 403	
		Address	
		Miami, F1 33137	
		City/State and Zip Code	
	michael@	bernstein-lawfirm.com	
	E-mail address: (to	o be used for future annual report notific	cation)
For further information c	oncerning this matter, please ca	II:	
Michael I. Bernstein		305 672-9544	
Name of Person		at ()	Telephone Number
		•	•
Produced is a shoot food	or C. Harrison		
Enclosed is a check for the	_		
\$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)

TO:

Registration Section

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

SAFEPRO WASTE DISPOSAL LLC	
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Companies Florida document number L18000024422	ny were filed on 01/26/2018 and assigned
This amendment is submitted to amend the following:	
rins amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	<u>ibility company here</u> :
The new name must be distinguishable and contain the words "Limited Lial	bility 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)	18 . ALL
	FE. AH
	AS AS
Enter new mailing address, if applicable:	7 SER
(Mailing address MAY BE A POST OFFICE BOX)	
	DRIDA OF THE OF
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 he	
	
Name of New Registered Agent:	
Naw Pagistared Office Address	
New Registered Office Address:	Enter Florida street address
	El. 11
	, 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>	Address	Type of Action
AMBR	Jessica Hoffman		
		4014 Chase Avenue, Suite 218	
		Miami Beach, Fl 33140	Remove
			Change
AMBR	AYS HOLDINGS LLC		
			Add
		4014 Chase Avenue, Suite 218	./
		Miami Beach, Fl 33140	Remove
			Change
			☐ Remove
		·	Change
			Remove
			Change
			Add
			🗆 Remove
			Change
			Add
			□ Remove
			Change

_							<u>_</u>
							
_							
_							
		<u> </u>				** <u>*</u>	
_						· ·	
_							
_		- dot - 10 leaves					833
			-		<u>-</u> -		4
		<u></u>					_
		<u></u>					ب <u>ن</u>
_			·			. <u>.</u> .	- 5
	<u> </u>						
	<u> </u>			·		· · · · · · · · · · · · · · · · · · ·	
_				·			
If an effec Note: I	ve date, if other the cetive date is listed, the lifthe date inserted intent's effective date of	date must be specific in this block does no	and cannot be pri ot meet the appl	licable statutory fi	or more than 90 days	optional) after filing.) Pursuant t , this date will not be	o 605.0207 e listed as
ne reco	ord specifies a c 90th day after t	delayed effectiv the record is file	e date, but r ed.	not an effectiv	e time, at 12:0	01 a.m. on the e	arlier of
	February 1		2018	A			
Dated _		///	1 / /	/ / /			
Dated _		Signature o	a member or au	thorized representat	tive of a member		_

Page 3 of 3

Filing Fee: \$25.00