

L18000091443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED
2018 MAY 17 PM 3:21
TALLAHASSEE FLORIDA

MAY 18 2018
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHV Services

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:

Richard Johnson P.A.

Name of Person

Richard Johnson Law Offices

Firm/Company

107 North Partin Dr.

Address

Niceville, FL 32578

City/State and Zip Code

richard@richardjohnsonlawfirm.com

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

For further information concerning this matter, please call:

Richard Johnson

850 279-6868

Name of Person

at (_____) _____
Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2018

RICHARD JOHNSON PA
107 N PARTIN DR
NICEVILLE, FL 32578

SUBJECT: SHV SERVICES LLC
Ref. Number: L18000091443

We have received your document for SHV SERVICES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a 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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 018A00009139

RECEIVED
2018 MAY 17 AM 10:03
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

FILED
2018 MAY 17 PM 3:21
TALLAHASSEE, FLORIDA

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

SHV 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 Liability Company were filed on 4/11/18 and assigned
Florida document number L18000091443.

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>
MGR	MICHAEL HICKS	200 KELLY ROAD	<input checked="" type="checkbox"/> Add
		NICEVILLE, FL 32578	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HENRY SHERMAN	200 KELLY ROAD	<input checked="" type="checkbox"/> Add
		NICEVILLE, FL 32578	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	EDUARDO VILCHEZ	200 KELLEY ROAD	<input checked="" type="checkbox"/> Add
		NICEVILLE, FL 32578	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	EDDIE VILCHEZ		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2018 MAY 17
 3:30 PM
 CIVIL SERVICE
 FLORIDA
 STATE

[illegible]

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 May 14th, 2018.

RICHARD S. JOHNSON, P.A.

Typed or printed name of signee

FILED
2010 MAY 17 PM 3:21
FBI - ALBANY
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 05-17-2010 BY 60322
UCBAW