118000138856

(Requ	uestor's Name)	
(Addr	ress)	
(Addi	ress)	·
(City/	State/Zip/Phone	e #)
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COVER LETTER

	Registration Se Division of Cor			
SUBJEC		SERVICES LLC		
SOBJEC	1	Name of Limi	ted Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please ret	um all correspo	ondence concerning this matter t	o the following:	
		Kelly DelValle		
			Name of Person	
		HOLLYS SERVICES LLC		
			Firn√Company	
		211 Southland Dr. Apt 1		
		·	Address	
		Fort Pierce Florida 34982		
		kellydelvalle18@gmail.com	City/State and Zip Code	
		E-mail address: (to	be used for future annual report n	otification)
For furthe	r information c	oncerning this matter, please cal	II:	
Kelly Del	valle		772 834-6424	
•••	Name of	f Person		ime Telephone Number
Enclosed i	is a check for th	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOLLYS SERVICES LLC

(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on ited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Comp Florida document number 1.18000138856	pany were filed on <u>06/05/</u>	and assigned
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 I	Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u> </u>	
		- C CETAR
		SOZOZO
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		RIONS
B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent:		records, enter the hame of the new
New Registered Office Address:	Enter Florida s	reet address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my as provided for in Chap	duties, and I am familiar with and ter 605, F.S. Or, if this document is
16.	Changing Pagistared 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>	Type of Action
MGR	Comez Pro	2706 s 26th St	■ Add
		Fort Pierce	🗆 Remove
		Florida 34981	☐ Change
MGR	Jose Gomez	2706 S 26th St	
		Fort Pierce	□ Remove
		Florida 34981	☐ Change
			□ Remove
			Change
			☐ Remove
			☐ Change
		<u> </u>	Add
		-	Remove
			Change
		. <u>. </u>	Add
			□ Remove
			Change

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	06/06/2018			
Tective date, if other than the date of filing: neffective date is listed, the date must be specific and c		are of filing or more t	optional) ban 90 days after filing.	
te: If the date inserted in this block does not me	et the applicable	statutory filing red	uirements, this date	will not be listed
cument's effective date on the Department of Sta	ie s records.			
record specifies a delayed effective da	te. but not ai	n effective time	, at 12:01 a.m.	on the earlie
The 90th day after the record is filed.	,		•	
n7/1:3/2/n19				
ted				
8	24)			
Signature of a me	mber or authorize	d representative of a	member	

Page 3 of 3

Filing Fee: \$25.00