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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

SUBJECT:	JH ( <u>JENERAL</u> Name of Lim	SERVICES (	<u>LLC</u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		DEE A Alamo	
	JAC	Senteral Service	ie llc
	185	00 old Cheme	y Hwy
	ORIAND	fl. 33820 City/State and Zip Code	)
	E-mail address: ()	GRYKES @ YANG	cation)
For further information co	oncerning this matter, please cr	SUSA. COM @ YAD	bo Long
Name o	2 Aures	at ( <u>407</u> ) <u>536</u> Area Code Daytime	S - 3708 Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	330.00 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

TO:

Registration Section Division of Corporations

> 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

If Changing Registered Agent, Signature of New Registered Agen

, ,

Page 1 of 3

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 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 ≠ Au	uthorized Member		
Title MGR	Jose S. Slave	18500 0/d Cheney.	Type of Action
		ORIANDO FL 82828	Remove
			Change
MBR	Alexandros. Albuo	15419 Pendido DA Oriando FL 23821	□ Add
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effective date is l e: If the date ir	isted, the date must is iserted in this bloom	date of filing: <u>«</u> be specific and cannot does not meet partment of State	ot be prior to date the applicable s	of filing or more the	an 90 days after I	nal) iling.) Pursuant to 605 date will not be liste
ecord specif ne 90th day	ies a delayed after the reco	effective date rd is filed.	, but not an	effective time,	at 12:01 a	.m. on the earlie
d Febru	MKY 3	25 2	000	<b>1</b>		
		\L _ ^\	1111	L		
	S	Signature of a memb	er or authorized	representative of a n	nember	

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Filing Fee: \$25.00