

L18000145886

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : SANDRA CASTILLO TAX SERVICE LLC
Account Number : I20190000047
Phone : (321)946-6560
Fax Number : (866)704-9120

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
O&R INDOOR/OUTDOOR REPAIR SERVICE LLC**

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: O&R INDOOR/OUTDOOR REPAIR SERVICE LLC
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:

OSCAR HERNANDEZ

Name of Person

O&R INDOOR/OUTDOOR REPAIR SERVICE LLC

Firm/Company

1638 BREAM DR

Address

SEVILLE, FL 32190

City/State and Zip Code

19CHAVO79@GMAIL.COM

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

For further information concerning this matter, please call:

SANDRA DANIS RAMOS

407

205 0002

Name of Person

at ()

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

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☐ \$55.00 Filing Fee &
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(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

O&R INDOOR/OUTDOOR REPAIR SERVICE 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 06/13/2018 and assigned
Florida document number L18000145886.

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)

1638 BREAM DR

SEVILLE, FL 32190

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1638 BREAM DR

SEVILLE, FL 32190

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:

1638 BREAM DR

Enter Florida street address

SEVILLE

City

Florida

32190

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. 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

MGR = Manager
AMBR = Authorized Member

[illegible]

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Filing Fee: \$25.00