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K SALY AUG 29 2018

COVER LETTER

TO: Registratio Division of	on,Section Corporations	
MV TA	AX LLC L18000177843	
30001CT	Name of Limited Liability Company	
The enclosed Article	es of Amendment and fee(s) are submitted for filing.	
Please return all corre	respondence concerning this matter to the following:	
	MICHAEL C NICHELE & VIVIANA F TRIMARCHI-NICHELE	
	Name of Person MV TAX LLC	
	Firm/Company 1334 PAWNEE POINTE COURT	
	Address TALLAHASSEE, FLORIDA 32312	
	City/State and Zip Codc vivitrimarchi@gmail.com	
	E-mail address; (to be used for future annual report notification)	
For further informati	ion concerning this matter, please call:	
VIVIANA F TRIMA		
Na	at ()at ()at Code Daytime Telephone Number	
Enclosed is a check f	for the following amount:	
S25.00 Filing Fee	ee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is encl	

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

SECRETALLAHASSEE, FLORIDA

MV TAX 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	JULY 24.2018	and assigned
Florida document number L180000177843			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company	y here:	
UNITED NATIONS SERVICES LLC			
The new name must be distinguishable and contain the words "Lin	nited Liability Company," t	he designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD)			-
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:		on our records, <u>ente</u>	the name of the new
New Registered Office Address:		Florida street address	
	r.nter		
	City	, Florida	The Contra
Non-District America Simulation (Calculation District	•		гуг соце
New Registered Agent's Signature, if changing Registere			
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change.	complete performance igent as provided for i od office address, I ho	of my duties, and Lam in Chapter 605, F.S. Or	familiar with and ; if this document is
	If Changing Registered	f Agent, <u>Signature of New F</u>	legistered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added FILED or removed from our records: 18 AUG 24 AH 3: 47 SECRE, AND DESTATE TALLAHASSEE, FLORIDA MGR = Manager AMBR = Authorized Member Address Type of Action <u>Title</u> <u>Name</u> □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove _ Change □ Add _____ □ Remove _____ Change ☐ Remove _□ Change □ Add ☐ Remove ☐ Change

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	SECRES TAILED	
	The state of the s	SSEE FINAL
		
ve date if other than the	date of filing: (optional)	
ective date is fisted, the date mus	t be specific and cannot be prior to date of filing or more than 90 days after filing.	.) Pursuant to 605.
	pek does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be liste
ord specifies a delayed	effective date, but not an effective time, at 12:01 a.m.	on the earlie
90th day after the rec	ord is filed.	
August 20	2018	
August, 20	·	
M: Land	N. I. A. I.	
Michael	Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00