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10/17/2018

Division of Corporations

Florida Department of State

Division of Corporations

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Division of Corporations  
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Phone : (813)882-8426  
Fax Number : (813)884-0263

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Email Address: margarethferreira02@hotmail.com

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MAGGIE'S GENERAL SERVICES LLC

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OCT 18 2018

EXAMINER

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: MAGGIE'S GENERAL SERVICES 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:

FERREIRA, MARGARETH

\_\_\_\_\_  
Name of Person

MAGGIE'S GENERAL SERVICES LLC

\_\_\_\_\_  
Firm/Company

14510 MARKLAND GREENS PL

\_\_\_\_\_  
Address

TAMPA, FL 33625

\_\_\_\_\_  
City/State and Zip Code

margarethferreira02@hotmail.com

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

For further information concerning this matter, please call:

MARGARETH FERREIRA

813  
at (\_\_\_\_\_) \_\_\_\_\_

8607523

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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

FILED  
2018 OCT 17 AM 8:41

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAGGIE'S GENERAL 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 L18000180305 and assigned  
Florida document number 07/26/2018.

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:

MARGARETH FERREIRA

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.

Margareth Ferreira  
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>
AMBR	WILDER, RANDALL P	14510 MARKLAND GREENS PL. TAMPA, FL 33625	<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
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Dated 10/11 1 2018

Margareth Ferreira  
Signature of a member or authorized representative of a member

Typed or printed name of signer