

L18000188268

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(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS
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N COOPER

AUG 14 2018

8/7/2018

Jeanee L. Wallace
3350 Emerald Point Drive
Apt 204A
Hollywood, FL 33021
305-951-0995

Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Dear Registration Section, Division of Corporation,

This letter is to change the manager of MOLD PROS OF FLORIDA, LLC, L18000188268, manager from Jeanee L. Wallace to Rafael Quiroz.

The form is attached with all of the information.

Thank you,

A handwritten signature in black ink that reads "Jeanee L. Wallace". The signature is written in a cursive, flowing style.

Jeanee L. Wallace

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOLD PROS OF FLORIDA, 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:

RAFAEL MUÑOZ
Name of Person

MOLD PROS OF FLORIDA, LLC
Firm/Company

14170 SW 7TH ST
Address

PEMBROKE PINES, FL 33027
City/State and Zip Code

rg33029@yahoo.com 954-812-8810
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEANNE L. WALLACE at (305) 951-0994
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

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

MOLD PROS OF FLORIDA, 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 8-6-2018 and assigned Florida document number L18000108208.

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)

RAFAEL QUIROZ
16170 SW 7TH ST
DEMBROKE PINES, FL 33027

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

16170 SW 7TH ST
DEMBROKE PINES, FL 33027

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:

Enter Florida street address

City, Florida

Zip Code

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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.

If Changing Registered Agent, Signature of New Registered Agent

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 8-7-

2018

Paul

Signature of a member or authorized representative of a member

RAFAEL AMROZ

Typed or printed name of signee