## L18000200291

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
`	,	
Certified Copies	Certificates	s of Status
	_	
<del></del>	<u> </u>	
Special Instructions to	Filing Officer:	
		1

Office Use Only



200349704812

08/07/20--01017--027 \*\*25.00

TILED
2010 AUG -7 PM 2: 19

661 67 3353

## **COVER LETTER**

TO: Registration Division of C			
subject: Refer	rect Accounting Sol	UTIONS, LLC. ited Liability Company	·
	of Amendment and fee(s) are subspondence concerning this matter		
	<u>Cristina Baldoc</u>	Name of Person	
	Baldoquin & C	OMPONY, LLC.	
	5220 Watern	nill Lune Apt, 104	
	Titusville, Fr 3	3)78() City/State and Zip Code	
	bold oquin 11c @	OM COM to be used for future annual report noting	fication)
For further informatio	n concerning this matter, please ca	all:	
Cristina Pala	ACQUIN se of Person	at ( <u>321</u> ) <u>349 –</u> Area Code Daytim	9530 e Telephone Number
Enclosed is a check for	or the following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>

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

Preferred Accounting Solution	ONS LLC., pany as it now appears on our I Liability Company)	r records.)		
(A Florida Limited	1 Liability Company)			
The Articles of Organization for this Limited Liability Compan Florida document number <u>L180002002011</u> .	y were filed on <u>08</u> 2	1/2018	and a	ssigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company here:			
Paldoquin & Company LLC.				·-·
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation	on "LLC" or the abbr		L.L.C."
Enter new principal offices address, if applicable:		AC	020 A	
(Principal office address MUST BE A STREET ADDRESS)			3n	
1. The state of th		5.4 6.4	-7	!
	-	<u> </u>	PH	ררו
			Š	D
Enter new mailing address, if applicable:	<del></del>	7.5		
(Mailing address MAY BE A POST OFFICE BOX)		111	<u> </u>	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records	, enter the name	of the n	ew register
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida stree	et address		
		, Flo <b>rid</b> a		
	City		Zip Coa	le
Now Designated Amenals Cinnetwee if shoreing Designand Amen	4-			

## 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

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

• •			
A	<b>MBR</b>	= Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			☐ Change
			□Add
			□Remove
			Change
			Change
			ASSET S □ Remove
		<del> </del>	
			□Add
			□Remove
			□Change
		<del></del>	□Add
			□ Remove
			□Change
			□Add
			\ \ \ \ \Remov <b>e</b>
			□ Change

						<u>.</u>			_
									_
	<u>-</u>								_
									_
		•		<u>-</u>		· · · · · · · ·			_
				<del></del>	·	<del>-</del>			
				***	· · ·		<u> </u>	2020	<del>-</del>
	<del></del>					<u>.                                    </u>		AUG	الله -
		<del></del>					it.≟ Sr≺	1	-F
				= -			SES.	<u> </u>	_ <u></u>
	<u> </u>				<u> </u>			<u>~</u>	D
							إبدا	9	
					-				_
				•.					_
		· · · · · · · · · · · · · · · · · · ·	·-·			···.			
<del></del>					<u></u>				<del></del>
				· <del></del>					_
Ties at the second	A					(	.:a.t\		
Effective date, if oth (If an effective date is listed Note: If the date inser document's effective d	d, the date must be ted in this block	specific and does not m	cannot be price	icable statut	iling or more th ory filing req	an 90 days aft	tional) er filing.) Pur nis date will	suant to 6 not be li	05.0207 (3 sted as th
he record specifies a dele ord is filed.	ayed effective da	te, but not	an effective	time, at 12:	01 a.m. on th	e earlier of: (	(b) The 90a	th day af	ler the
Dated _ AINUCH	3	,	2020	<u>)                                    </u>					
Dated AINUCH	Zaldo Sig	7(//// hature of a n	nember or aut	horized repre	esentative of a	nember			
	istina Ba	Mond	Typed or prin						

Filing Fee: \$25.00