

L18000236234

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2013 FEB 22 P 3 28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FEB 27 2013
T. LEMBEUX

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: EFFECTIVE COMMUNICATION SOLUTIONS, 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:

HAZATUL F ABDULLAH

Name of Person

Firm/Company

1218 N Victoria Park Rd

Address

Fort Lauderdale, Florida 33304

City/State and Zip Code

effectivecommunication7@gmail.com

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

For further information concerning this matter, please call:

Hazatul F Abdullah

972 854-2588

at ()

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

TO
ARTICLES OF ORGANIZATION
OF

FILED

EFFECTIVE COMMUNICATION SOLUTIONS, LLC

2019 FEB 22 P 3:31

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
October 5, 2018

The Articles of Organization for this Limited Liability Company were filed on _____ and assi

Florida document number 118000236234

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

EFFECTIVE COMMUNICATION SOLUTIONS, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.

Enter new principal offices address, if applicable:

1218 N VICTORIA PARK RD

(Principal office address MUST BE A STREET ADDRESS)

FORT LAUDERDALE, FL 33304

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 registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

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 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 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

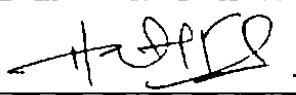
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
(b) The 90th day after the record is filed.

Dated FEBRUARY 20, 2019



Signature of a member or authorized representative of a member

HAZATUL F ABDULLAH

Typed or printed name of signee