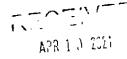
## 

Office Use Only





## **COVER LETTER**

TO:

Registration Section
Division of Corporations

CREI SUBJECT:	OIT SOLUTION AND INMIGRAT	IONS SERVICES LLC	
SUBJECT.	Name of Lin	nited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are sul	bmitted for filing.	
Please return all co	rrespondence concerning this matter	r to the following:	
	OLGA BENET		
	<del></del>	Name of Person	
	CREDIT SOLUTION AN	ID INMIGRATIONS SERVICES I	LLC
		Firm/Company	
	11170 NW 5 MANOR		
		Address	
	CORAL SPRINGS FL 33	071	
		City/State and Zip Code	
	obenet27@gmail.com		
	E-mail address:	(to be used for future annual report not	ification)
For further informa	tion concerning this matter, please o	eall:	
OLGA BENET		305 283-7022	
Name of Person			ne Telephone Number
Enclosed is a check	for the following amount:		
S25.00 Filing F	Gee \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Division P.O. Box	tion Section of Corporations	Street Address: Registration Se Division of Con The Centre of 1 2415 N. Monro	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## CREDIT SOLUTION AND INMIGRATIONS SERVICES LLC

( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	inv as it now appears on c Liability Company)	our records.)	<del></del>
The Articles of Organization for this Limited Liability Company	were filed on JUNE 1.	5, 2020.	_ and assigned
Florida document number L18000256155			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
ON TIME MULTI-SERVICES LLC			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designa	tion "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	iability Company here:  iability Company," the designation "LLC" or the abbreviation "L.L.C."  11170 NW 5 MANOR CORAL SPRINGS FL 33071  Ce address on our records, enter the name of the new reg  Enter Florida street address	FL 33071	
(Principal office address MUST BE A STREET ADDRESS)		25. 39 O)	<del>                                      </del>
		<u>第</u>	<del></del>
			•
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		Dr.	- F
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	address on our record	ls, <u>enter the name o</u>	f the new registere
New Registered Office Address:			
	Enter Florida str	eet address	
<del></del>	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my d provided for in Chapt	luties, and I am fam er 605, F.S. Or, if t	iliar with and his document is

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>	Address	Type of Action
			□Add
			□Remove
		<del> </del>	Change
			12 De move
			Add 17
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			☐ Change
			□Remove
			L. Change

							_
	, <del></del> ,						
							_
		<u>.</u>					_
			<del></del>			***	_
							-
							_
					<u> </u>	2071	<del>_</del>
					<u> </u>	Λ <b>P</b> R	 
		·· · · · ·			7.1.2	20	·
-					Tyres	R	]
					71. 101.	<del></del>	<u> </u>
			·		DRIED A	<u> </u>	_
							_
							_
	······································				<del></del>		_
							_
ffective date, if other than an effective date is listed, the date ote: If the date inserted in this ocument's effective date on the	must be specific and sis block does not m	cannot be prior to eet the applicab		ore than 90 days af			
record specifies a delayed effe	ctive date, but not a	an effective tim	e, at 12:01 a.m.	on the earlier of:	(b) The 90	th day aft	er the
is filed.							
04/06		2021	- ·				
is filed.  04/06  ated	Signature of a m	<del></del>	zed representative	of a member			