

L18000267799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

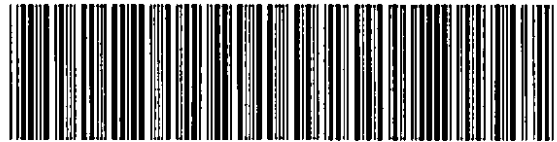
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/03/18--01020--011 ♦♦25.00

2018-12-03 10:27

FILED

12/16/18 DS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E R K Multiple 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:

Madelyn Suarez
Name of Person

Firm/Company

8150 SW 8th st ste 104
Address

Miami, FL 33144
City/State and Zip Code

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

For further information concerning this matter, please call:

Madelyn Suarez at (786) 780-8758
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
2019 JUN 27 10 27

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

E & K Multiple 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 11/15/2018 and assigned Florida document number L18000267799.

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)

8150 SW 8th st
Suite 104
Miami, FL 33144

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8150 SW 8th st
Suite 104
Miami, FL 33144

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:

Esther L. Gonzalez

New Registered Office Address:

8150 SW 8th st suite 104

Enter Florida street address

Miami

City

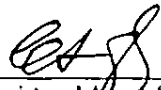
Florida

33144

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.



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	Madelyn Suarez Diaz	8150 SW 8th st	<input type="checkbox"/> Add
		Suite 104	<input checked="" type="checkbox"/> Remove
		Miami, FL 33144	<input type="checkbox"/> Change
MGR	Madelyn Suarez Diaz	8150 SW 8th st	<input checked="" type="checkbox"/> Add
		Suite 104	<input type="checkbox"/> Remove
		Miami, FL 33144	<input type="checkbox"/> Change
MGR	Esther h. Gonzalez	8150 SW 8th st	<input checked="" type="checkbox"/> Add
		Suite 104	<input type="checkbox"/> Remove
		Miami, FL 33144	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2012-01-01

[illegible]

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 november 28, 2018

Madelyn Suarez
Typed or printed name of signer