# 119000019344

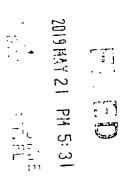
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700329594657

05/21/19--01012--029 \*\*25.00



WHITE 10 6 2019

### **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: RON'S	REPAIRS & MAINTENA		
	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Processing Departme		
		Name of Person	
	<del> </del>	Firm/Company	<del></del>
	5605 Riggins Court	Suite 200	
		Address	<del></del>
	Reno. NV 89502		
		City/State and Zip Code	
	docs@incauthority.com		
	E-mail address: (	to be used for future annual report notif	fication)
For further information	concerning this matter, please c	all:	
Processing Department		at (800) 638-2320	
Name (	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	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:

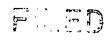
TO:

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



RON'S REP	AIRS & MAINTE	ZOTS HAY	21 PH 5:31
	pility Company as it now appe		31,4.5
The Articles of Organization for this Limited Liability Florida document numberL19000019344		· -	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company	<u>here</u> :	
The new name must be distinguishable and contain the words "L	imited Liability Company," the	designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad		on our records, <u>en</u>	ter the name of the ne
Name of New Registered Agent:			
New Registered Office Address:	Enter F1	orida 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 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>	Type of Action
MGR_	Sara Halczak	1370 Fleming St	🖸 Add
		Fleming Island, FL 32003	Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change
			Add
			Remove
			Change
			□ Add
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
D. II amending any outer information, enter change(s) here. Vallet change and steeds, g recessary.)
E. Effective date, if other than the date of filing:  Of 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 605.0207 (3)(b)  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.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
Datterd Mary 110th, 2019
- Jan
Signature of a member or authorized representative of a member
Ronald Hakzak
Typed or printed name of classes

Page 3 of 3

Filing Fee: \$25.00

TO:

PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING:

Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM:

National Corporate Headquarters, Inc.

5605 Riggins Court Suite 200

Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE:

Thursday, May 16, 2019

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

Articles of Amendment to Articles of Organization
 For RON'S REPAIRS & MAINTENANCE, LLC

We have included payment in the amount of \$25.00 for the following fees:

Amendment

We have included one original

If there are any questions, please call 800-638-2320

### Please return the file stamped copy of the Amendment to the address below:

Processing Department 5605 Riggins Court Suite 200 Reno NV 89502