# L19000033239

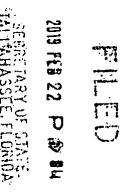
(Re	questor's Name)	
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#### **COVER LETTER**

Div	ision of Corp	porations		
SUBJECT:		1 MULTI SERVICES LLC		
		Name of Limi	ited Liability Company	···
The enclosed	d Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspoi	ndence concerning this matter	to the following:	
		Rachel Gonzales		
			Name of Person	
		Matriach Multi Services LI	LC	
		<del> </del>	Firm/Company	
		301 NW 51ST		
			Address	
		FORT LAUDERDALE, FI	L 33309	
			City/State and Zip Code	
		E-mail address: (t	to be used for future annual report notif	ication)
For further is	nformation co	oncerning this matter, please ca	all:	
Rachel Gonz			786 769-0960 at ()	
	Name of	Person	Area Code Daytimo	Telephone Number
Enclosed is a	check for th	e following amount:		
\$25.00 F	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)

TO:

Registration Section

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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

#### MATRIACH MULTI SERVICES LLC

(Name of the Limited Liability Company as it now appears on our resolids 1 22 (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 02/01/2019 TALLAHASSEE. Fland Wage
Florida document number L19000033239	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
MATRIARCH MULTI SERVICES LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	301 NW 51ST STREET
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE, FL 33309
Enter new mailing address, if applicable:	301 NW 51ST STREET
(Mailing address MAY BE A POST OFFICE BOX)	FORT LAUDERDALE, FL 33309
(Mailing address MAY BE A POST OFFICE BOX)	FORT LAUDERDALE, FL 33309
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:	fice address on our records, enter the name of the
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:	fice address on our records, enter the name of the
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:	fice address on our records, enter the name of the e:  Enter Florida street address , Florida
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:	fice address on our records, enter the name of the e:  Enter Florida street address

If Changing Registered Agent, Signature of New Registered Agent

## 11 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person b or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of A
	RACHEL GONZALES	301 NW 51ST FORT LAUDERDALE, FL 33309	
		<del></del>	■ Remove
	RACHEL GONZALEZ	301 NW 51ST STREET	☐ Change
AMBR		FORT LAUDERDALE, FL 33309	■ Add
		<del> </del>	□ Remove
			Change
	<u></u>		Add
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			Change

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	<del></del>
(lf an e <u>Note</u> :	tive date, if other than the date of filing: (optional)  ffective 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 (and the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	1 February 15 . 2011.
	February 15 . 2011.  Signature of a member or authorized representative of a member
	Rachel Genzaliz Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00