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ECRETARY OF STATE
ALLAHASSEE FLORIDA

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COVER LETTER

TO: Registration Division of C			
SUBJECT:	ays Acordable Name of Lin	Tree & Just Service Service Company	rice
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Matthew Hur Always affo	Name of Person 12able From End Lo	awn Service
	9214 54th Ct	Address	
		S4219 City/State and Zip Code OK 16 @ 9MG(1 Com to be used for future annual report notif	ication)
For further information	concerning this matter, please c		
Name	of Person	at () 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)
MAI	LING ADDRESS:	STREET/COURIE	ER ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on Feb. 21, 2019 and assigned Florida document number L19000 5162. 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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 Matthew Hombic 924/54th Ct Eparrish	_D Xdd
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Note: If the date	f other than the d s listed, the date must b inserted in this bloc live date on the Dep	k does not meet tr	ie applicable statut	21. Zolq iling or more than 90 ory tiling requiren	(optional) days after filing.) nents, this date v	Pursuant to 605,0 will not be listed
ne record spec	ifies a delayed of after the recor	effective date, d is filed.	but not an effe	ective time, at	12:01 a.m. c	on the earlie
The 90th day						
The 90th day Dated $\sqrt{-2}$	14	·	·			
The 90th day Dated $\sqrt{-2}$	14 Nottlar Matthe	MUMSA gnature of a member	er or authorized repre	sentative of a memb	er	

Page 3 of 3

Filing Fee: \$25.00