L19000066182

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(ON) ORDER (ON)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2000
Contilled Continue Contilled of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

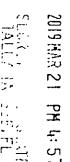
Office Use Only

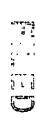


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COVER LETTER

TO: Registration S Division of Co			
CHDICOT.	MH MULTISERVICE LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MARY A HERNANDEZ SE	RRANO	
		Name of Person	
	4810 SMITH RYALS RD	Firm/Company	
		Address	
	PLANT CITY, FL 33567	Address	
	MHRNANDEZMULTISERVI	City/State and Zip Code CE@GMAIL.COM	
		to be used for future annual report notifi	cation)
For further information	concerning this matter, please of	all:	
MARY A HERNANDE		813 756-9619	
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)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

TO:

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

2019 MAR 21 PM 4: 57

MH MULTISERVICE LLC		\$952
(Name of the Limited Liability Company a (A Florida Limited Liabi	s it now appears on our r lity Company)	ecords.
he Articles of Organization for this Limited Liability Company wer	re filed on MARCH 7.	2019 and assigned
lorida document number L19000066182		•
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
he new name must be distinguishable and contain the words "Limited Liability C	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)		
_		7.1.
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
<u> </u>		<u> </u>
3. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	· address on our rec	cords, enter the name of the
tentered agent and of the new registered office address here.		
Name of New Registered Agent:		
Name of New Registered Agent: New Registered Office Address:	Enter Florida street a	ddress
		ddress _, Florida

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

Title	<u>Name</u> MARY A HERNANDEZ SERRANO	Address 4810 SMITH RYALS RD	Type of Action
AMBR		PLANT CITY, FL 33567	
			□ Remove
		TO CORRECT FIRST NAME OF AMBR	■ Change
			Remove
	•		Change
			Remove
			Change
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Effective date, if other than the offertive date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and cannot does not meet (not be prior to d the applicable	ate of filing or more statutory filing	(opt e than 90 days afte requirements, th	r filing.) Pursuant to	605.0207 (3 listed as th
he record specifies a delayed The 90th day after the reco	effective date ord is filed.	, but not a	n effective tir	ne, at 12:01	a.m. on the ea	orlier of:
Dated	20	019				
da . 1	ernandes Signature of a myshe					
	innatura of a month	nor or and and	d range	fa		-

Page 3 of 3

Filing Fee: \$25.00