



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.
Account Number : T26010G00062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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AND
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2019 JUN 25 PM 4:07

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ORLANDO'S VERY OWN PERSONAL CHEF SERVICES LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 05 |
| Estimated Charge | \$55.00 |

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JUN 26 2019

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Corporate Filing Menu

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06-20-'19 13:16 FROM- Waterstone Mortgage 407-622-0435

T-620 P0002/0008 F-711

COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT: ORLANDO'S VERY OWN PERSONAL CHBF 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:

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N. Brand Blvd., 11th Floor

Address

Glendale, CA 91203

City/State and Zip Code

dave80594@yahoo.com

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

For further information concerning this matter, please call:

Cheyenne Moseley

Name of Person

at 800 773-0888 ext. 9724

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
Chifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

ORLANDO'S VERY OWN PERSONAL CHEF 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 03/13/2019 and assigned Florida document number L19000070931

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

100 Myrtle Street #224

(Principal office address MUST BE A STREET ADDRESS)

Longwood, Florida 32750

Enter new mailing address, if applicable:

100 Myrtle Street #224

(Mailing address MAY BE A POST OFFICE BOX)

Longwood, Florida 32750

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

City, Florida

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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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 | David M. Steven | 911 N. ORANGE AVE., APT. #433 | <input type="checkbox"/> Add |
| | | ORLANDO, FL 32801 | <input checked="" type="checkbox"/> Remove |
| AMBR | David M. Stevens | 100 Myrtle Street #224 | <input checked="" type="checkbox"/> Add |
| | | Longwood, Florida 32750 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated June 25th 2019


Signature of a member or authorized representative of a member

David M. Stevens

Typed or printed name of signor

Page 3 of 3

Filing Fee: \$25.00

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MIRANDA