

UP00007403

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : RC TAX SERVICE LLC
Account Number : I20140000083
Phone : (407)932-0040
Fax Number : (407)520-5473

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
JUL 23 2020 4:12 PM

2020 JUL 23 PM 12:47

FILED

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

Email Address: NAAL@IVERCORPORATION.COM

2020 JUL 23 AM 8:11
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
IVER FACILITIES MANAGEMENT LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

IVER FACILITIES MANAGEMENT LLC

*(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)*

FILED
2020 JUL 23 PM 12:47
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF ORANGE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/15/2019 and assigned Florida document number L19000074203

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 "L.L.C."

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: JOSE D. NEIRA

New Registered Office Address: 6923 NARCOOSSEE RD, STE 613
Enter Florida street address

ORLANDO, Florida 32822
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.

J. D. Neira

If Changing Registered Agent, Signature of New Registered Agent:

It 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>	<u>Type of Action</u>
MGR	JOSE NEIRA	6923 NARCOOSSEE RD, STE 613	<input checked="" type="checkbox"/> Add
		ORLANDO FL 32822	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JULIO H HANZE	5819 COVINGTON COVE WAY	<input type="checkbox"/> Add
		ORLANDO FL 32829	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

