L19 0000 86322

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

Office Use Only



100346775171

06/29/20--01013--020 **35.00

2020 JUH 29 AM 6: 38

AUG 12 2020 S. YOU'NG

COVER LETTER

TO:						
SUBJE	over.		LC			
30302	.c.r		nited Liability Company			
			*			
		OWEN CLARK				
			Name of Person	**		
		Name of Person ELIMINATOR'S PEST CONLLCTROL 07, LLC Firm/Company 7820 NW 45TH STREET Address LAUDERHILL, FL 33351 City/State and Zip Code JAYLEAN2002@YAHOO.COM E-mail address: (to be used for future annual report notification) ormation concerning this matter, please call: K 954 Area Code Daytime Telephone Number heck for the following amount: ng Fee \$\Bigsim \$30.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)				
			Firm/Company	 		
		-	Address			
		LAUDERHILL, FI. 3335	1			
		City/State and Zip Code				
		•				
		E-mail address: (to be used for future annual	report notification	on)	
For furt	her information co	oncerning this matter, please ca	all:			
OWEN	CLARK		954 24:	5-6148		
	Name of	f Person		Daytime Tele	phone Number	
Enclose	d is a check for th	e following amount:				
■ \$25	.00 Filing Fee		Certified Copy		Certificate of Status & Certified Copy	
	Mailing Address		Street Ac	ldress:		

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

Registration Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELIMINATOR'S PEST CONLLCTROL 07, LLC

(<u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears on our r mited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Com Florida document number L19000086322 This amendment is submitted to amend the following:		and assigned
A. If amending name, enter the new name of the limited	d liability company here:	ယ် တ
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 ADDRES	SS)	
Enter new mailing address, if applicable:		,
(Mailing address MAY BE A POST OFFICE BOX)		/
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	Mice address on our records, <u>er</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ac	ldress
		, Florida
 .	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.

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>	Address	Type of Action
			□Add
			□ Remove
	~	-	☐ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			Петоve
			□Change
			🗀 Add
			Remove
		/	□Change
			□Add
			□Remove
			□ Change

	According to the Electronic Articles of Organization for Florida Limited Liability Company Article III, ions;
(Other provisions, it states PAST CONTROL, please change to PEST CONTROL.
-	
~	
_	
_	
_	
_	
-	
_	
_	
_	
_	
-	
_	
_	
fecti	ve date, if other than the date of filing: (optional)
<u>де.</u>	ctive 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 (f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
Cume	nt's effective date on the Department of State's records.
cord	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is file	d.
	Internal Control
	$\frac{\mathcal{O}(20/2)}{2}$,
iea _	
ica _	Signature of a member or authorized representative of a member