## 119 0000 90435

(Requestor's Name)
(Address)
(Address)
(133,335)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Cadification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100327515611

04/15/19--01025--030 \*\*25.00

TALLAHASSEE, FLORINA

FILED

## **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJE	CT:	17+A Maintener	ANCE Services ited Liability Company		
The end	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspo	ndence concerning this matter	to the following:		
		<u>Hahley</u>	Name of Person		
		A+A Ma	Eirm/Company	2019 APR 15	-17
		9900 57	homas Dr 222 Address		FILED
		PCB.	F1 32408 City/State and Zip Code	A 7 2 L	U
		F-mail address: (1	1Gin terence Scruiges .cci	fication)	
For furt	her information co	oncerning this matter, please ca	ıll:		
	Aircucrth Name of	Francis Person	at (\$50) 628 Area Code Daytime	- C ? I Q e Telephone Number	
Enclose	d is a check for th	e following amount:			
<b>E</b> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Maintanace Services
(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 <u>412119</u> and assigned Florida document number <u>L19000090435</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
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:
Name of New Registered Agent.
New Registered Office Address:  Enter Florida street address
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 th

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	<u>Address</u>	Type of Action
			Remove
			Change
			□ Remove
			Change
· <del></del>			
		-	Remove
			Remove  Remove  Change
			Remove  Remove  Remove  Remove
			Change
	<del></del>		
			□ Remove
			Change
<del></del>			
			Remove
			∏ Change

					· · · · · · · · · · · · · · · · · · ·			
						<u>-</u>		
		<u> </u>						<del></del>
	-						<del>.</del> .	
<del></del>	<del></del>		<u>-</u>					
						<u> </u>		
						), [-]	2018	
							धुवर्	
·						35 P 27 27	ري	
<del></del>		<del></del>		<del></del>		<u> </u>	<del></del>	
						<u></u> 公。 多,	بـ	
				<del></del>				
fective date, if one offective date is lefter. If the date in the cument's effective date in the date	listed, the date munserted in this b	ast be specific and block does not r	d cannot be prio	cable statutory	or more than 90	(optional)	<b>al)</b> ing.) Purst	
e record specif The 90th day				ot an effecti	ve time, at	12:01 a.n	n. on th	ie earli <b>e</b> r
ated <u>Apr</u>	1 11th		2019	·				
		1	<u>(</u>					
		Signature of a	member or auth	norized represent	ative of a memb	er		

Page 3 of 3

Filing Fee: \$25.00