L19000130810

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
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R. WHITE
JUL 03 2019





June 20, 2019

JOSE E FERNANDEZ 20620 SW 119TH CT MIAMI, FL 33177

SUBJECT: FERNANDEZ DOOR SERVICES LLC

Ref. Number: L19000130810

We have received your document for FERNANDEZ DOOR SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Foreign limited liability company, but your entity is a Florida limited liability company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist III

Letter Number: 619A00012440

SOISTON -S VAIL: SP

BECEINED

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www.sumbiz.org

COVER LETTER

Division of Corporations
SUBJECT: Fernandez Door 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:
Jose E. Fernandez Name of Person
Firm/Company
20620 SW 119th Ct
Hiami Florida 33177 City/State and Zip Code
Fernandez 0331@ Vahoo - Com E-mail address: (to be used for future ahnual report notification)
For further information concerning this matter, please call:
Jose E. Fernandez at (786) 236 8507 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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TO:

Registration Section

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

Registration Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, Fl. 32301

STREET/COURIER ADDRESS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Farmandaz	Dono	Carriera	2019 JUL -	-2 PM 1:49
(Name of the Limited I	Liability Company Florida Limited Lia	as it now appears on ou bility Company)	or records.)	TO SHE
		ere filed on <u>05</u>	14/2019	and assigned
Florida document number <u>L 190001308</u>	<u>s 10</u> .			and assigned
da document numberL_IQ_OOL3O8_IO amendment is submitted to amend the following: f amending name, enter the new name of the limited liability company here: ew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." er new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS) er new mailing address, if applicable: illing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new				
A. If amending name, enter the new name of th	ng name, enter the new name of the limited liability company here: aust be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." incipal offices address, if applicable: ice address MUST BE A STREET ADDRESS) ailling address, if applicable: ress MAY BE A POST OFFICE BOX) ding the registered agent and/or registered office address on our records, enter the name of the new ent and/or the new registered office address here: Registered Office Address: Enter Florida street address Florida			
The new name must be distinguishable and contain the words	s "Limited Liability	Company," the designati	ion "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicabl	le:	- 		
(Principal office address MUST BE A STREET A	ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>(X)</u> .			
		ce address on our	records, <u>enter</u>	the name of the new
Name of New Registered Agent:		<u></u>		
New Registered Office Address:		Enter Florida stre	et address	
_			, Florida	w. a. t
		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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jose E Fernandez	206205W 119mct Wami FL 33177	Add
			🗆 Remove
			Change
			D Add
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ote:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed. Γ
ated	June 29 2019
	1/1

Page 3 of 3

Filing Fee: \$25.00