# 119000131080

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DUE TO RETURNED CHECK

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### **COVER LETTER**

### FILING CANCELLED DUE TO RETURNED CHECK

TO: Registration Se Division of Cor			1	<u></u>
SUBJECT:	<u> </u>	Slving Solving	TIONS 3	C1330 V.
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		_
Please return all correspo	ndence concerning this matter	to the following:		
	Willie	Firlow III		
	Problem	Solving Company	Solutions	
	8011	CARDINAL D	P.	
	TAM	City/State and Zip Code	617	
	WFrl	to be used for future annual report notif	il. Com	
For further information e	oncerning this matter, please co	all:		
Willie Name o	Fir ow recon	at ( <b>§ 3</b> ) <b>3</b> 84 Area Code Daytime	4-0704 Telephone Number	
Enclosed is a check for ti	ne 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 of Certified Copy (additional copy is enclose	

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

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### ARTICLÉS OF AMENDMENT TO

### ARTICLES OF ORGANIZATION

	Or		(C) (Mar. 1)
Problem	Solving	Solutions	13 GO
(Name of the Limited Li	iability Company as it no lorida Limited Liability Co	inpany)	را الم
The Articles of Organization for this Limited Liabili	ity Company were file	d on 05/13/20	2/9 and assigned
This amendment is submitted to amend the followin	ાદે:		
A. If amending name, enter the new name of the	limited liability com	pany here:	
The new name must be distinguishable and contain the words	"Limited Liability Compa	iy," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET A.	DDRESS)		- 10-7-10-7-10-7-10-7-10-7-10-7-10-7-10-
	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office	• •	ress on our records, <u>ent</u>	er the name of the new
Name of New Registered Agent:	Willi	e Firlow I	
New Registered Office Address:	8011	CARDINA L. J.	) R
<del></del>	TAMPA	, Florida	33617

#### 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, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Willie Fir ow III	8011 CARDINAL DR.	<b>X</b> Add
Ei	LING CANCELLED		□ Remove
	UE TO RETURNED CHECK		Change
			Add
			□ Remove
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<u>ite:</u> If the date in	other than the date of filing:  sted, the date must be specific and cannot be serted in this block does not meet the ape date on the Department of State's reco	oplicable statutory tiling re	(optional) than 90 days after filing.) Pursuan quirements, this date will not	a to 605.020 be listed :
record specif The 90th day	ies a delayed effective date, but after the record is filed.	t not an effective tim	e, at 12:01 a.m. on the	earlier
ted <b>\</b> \\\ \\ \\ \\ \	V. 25,2019.	·	_	
	1-10			
	(1) (1/V x.	9 Ct. Va	W 44-5	

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Filing Fee: \$25.00

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