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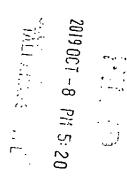
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OCT 2.8 2019 C. Kinsey

COVER LETTER

Division of Corporations
SUBJECT: FIRST Charce Junk Removal 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:
Mario Victor Name of Person
First Choice Junk Removal
1006 Old Boynton Read
Boynton Beach FL 33426 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mario Victor Name of Person at (561) 613 - 3562 - Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

The Articles of Organization for this Limited Liabi Florida document number <u>L. 190001:34</u>		were filed on <u>05</u>	02-20	$\mathcal{Y}_{\underline{q}}$ and assig	<u>z</u> ned
This amendment is submitted to amend the following					
A. If amending name, enter the new name of th	<u>ie limited liabi</u>	lity company here:			
The new name must be distinguishable and contain the word	s "Limited Liabili	ty Company," the designa	ation "LLC" or the	abbreviation "L.L	.C."
Enter new principal offices address, if applicable	le:	1006 010	1 Boyn	ton Ra	ad
(Principal office address MUST BE A STREET A	ADDRESS)	Boynton	Beach	FL.	33426
Enter new mailing address, if applicable:				2019 O	
(Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>			17 8	ક્ષ્યું • ભારાવાનું • ભારુ - મ
B. If amending the registered agent and/or registered agent and/or the new registered office			records, ente	rithe name o	f the new
Name of New Registered Agent:	Mario	Victor	• • •		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	1006 [Id Boyn 10 Enter Plorida str	<u>N ROOC</u>	<u>/</u>	
	Boynlor	1 Beach	, Florida _	33421 Zip Code	2

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.

MULLO //C/OV

If Changing Registered Agent, Signature of New Registered Agent

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

Title Address **Type of Action** Name Mario Victor 1006 Old Boynton Road 10 Add

Boynton Beach FL 33426 emove MGR _□ Change □ Add □ Remove _ Change ☐ Add ☐ Remove ☐ Change ☐ Remove _ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove □ Change

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an eife l <u>ote:</u>	ve date, if other than the date of filing:
The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
ated .	September 15 th . 2019. Mario Unchritical representative of a member
	Signature of a member or authorized representative of a member
	HARIO UICIOR Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00