L19000 158516

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	<u>-</u>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
00)	Silless Cittly Nai	ne)
(Do	cument Number)	 -
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



200366438212

06/01/21--01021--023 **52.50

200366438212 97/30/21--01024--014 **7.50

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Check Sent with remaining amount.

PRICE OF STATE Division of Corporations

June 29, 2021

JONATHAN LIMA 17580 SW 153RD COURT MIAMI, FL 33187

SUBJECT: MIAMI WASTE VALET LLC

Ref. Number: L19000158516

We have received your document for MIAMI WASTE VALET LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Alecia Rivers Regulatory Specialist II

Letter Number: 921A00014782

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Migmi Waste Name of Lim	Valet LLC ited Elability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	J。	nathan Lima Name of Person	
		Name of Person ami Waste Va Firm/Company	
	175	80 SW 153 PD Address	Court
		City/State and Zip Code Jima 90 a ol - Co to be used for future annual report not	
For further information o	concerning this matter, please ca	ill;	
Jonath Name o	nan Lima of Person	at (<u>786</u>) <u>38</u> Area Code Daytin	CO - GZ & 7
Enclosed is a check for t	he 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 & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Miami Wa	ste Valet	UC	
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Compan Florida document number <u>LV9000158516</u> .	y were filed on	06/17/2010	9_ and assigned
This amendment is submitted to amend the following:			
	VENDING	1 LLC	
The new name must be distinguishable and contain the words "Limited Liai	oility Company," the d	esignation "LLC" or the abl	reviation "L.L.C."
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 agent and/or the new registered office address here:	address on our ro	ecords, enter the name	of the new registere
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	ida street address	
		, Florida	و
New Registered Agent's Signature, if changing Registered Agent	City .		Zip Code 🚄
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	- ree to act in this c performance of , provided for in C	my duties, and I am fa hapter 605, F.S. Or, i	uniliar with and If this document is

H 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			[]Add
			□Remove

			Remove
			□Change
			bbACl
			□Remove
		□Change	
			□Add
		Remove	
		□Change	
			□Add
		□Remove	
		□Change	
		□ Add	
		□Remove	
			[]('banas

). If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	we date, if other than the date of filing:
the record	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 ed.
Dated _	07/21/2021
	Signature of a member of authorized representative of a member
	Jonathan Lima Typed or printed name of signee

. . . . **T** .

Filing Fee: \$25.00