## 119000210847

(F	Requestor's Name)
(F	Address)
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(r	nuuress)
(C	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(C	Oocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

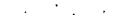
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July 22, 2024

TIMOTHY LENEVE 2134 OAKMONT DR. RIVIERA BEACH, FL 33404

SUBJECT: EXCEL PROPERTY SERVICES LLC

Ref. Number: L19000210847

We have received your document for EXCEL PROPERTY 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L22000284977.

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) 245-6051.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 324A00016089

## **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:	EXCEL	PROPERTY	SERVICES LLC				
		Name of Lim	ited Liability Company				
The enclosed Ar	ticles of Amend	ment and fee(s) are sub	mitted for filing.				
		concerning this matter	_				
	volt ou pondence	evineering time matter	to the following.				
		TIMOTHI L	ENEVE Name of Person				
	*****	· · · · · · · · · · · · · · · · · · ·	Name of Person				
		EXCEL Pr	LOPERTY SERVICES Firm/Company				
			Firm/Company				
		2134 OAK	mont or				
	<del></del>		Address				
		KIVIER	A BEACH , FL 334 City/State and Zip Code	uy			
	<del></del>						
	<u> </u>	TNfo 0 /	PAVEN SEALEN PROS to be used for future annual report notifi	, (UV			
For further infor	mation concernir	ng this matter, please ca		(Canada)			
Timo	THU LFN	F v G	541 \$14-10	1)			
7 I MOTHY LENEVE Name of Person			Area Code Daytime Telephone Number				
Enclosed is a che		•					
☑\$25.00 Filin	g Fee 🗀 \$3	0.00 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)			
Mailine	Address:		Street Address:				
Regist	ration Section		Registration Section				
	on of Corpora lox 6327	tions	Division of Corp				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EXCEL PROPERTY SERV	/ILES	
EXCEL PROPERTY SERV (Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	<del></del>
The Articles of Organization for this Limited Liability Company v Florida document number <u>L1966210847</u>	1	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
PAVER SEALING Pros LLC  The new name must be distinguishable and contain the words "Limited Liability".		
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the abbrevia	ation "L.L.C."
Enter new principal offices address, if applicable:	JOI YM STREET NO SUITE 300 ST. PETERSBURG, FL 3	KTH
(Principal office address MUST BE A STREET ADDRESS)	SUITE 300	
	ST. PETERSBURG, FL 3	3762
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter the name of</u>	the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
· ·	City Zi	p 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, 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
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		50 FTE 300	□Remove
		ST. PETERSBURG : FL 33712	Dechange
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an effo lote:	ve date, if othe ective date is listed, If the date inserteent's effective da	the date must be ed in this block	specific and car does not mee	nnot be prior to t the applicab			90 days after		
record	I specifies a delayed.	yed effective da	ite, but not an	effective tim	e, at 12:01 a	.m. on the	earlier of: (b	) The	Юth day after
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		ونک	nature of a men	nber or authori	zed represent	ative of a me	mber		-

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Filing Fee: \$25.00