L19000249060

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COVER LETTER

то:	Registration Sec Division of Corp			
SUBJE(RVICES LLC		
SUBJEA	UI:	Name of Limit	ted Liability Company	
The enc	losed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please r	etum all correspon	ndence concerning this matter t	o the following:	
		JOSE F. CORDERO MARO	QUEZ	
			Name of Person	
		CORVIE SERVICES LLC		
	Firm/Company			
	5448 HOFFNER AVE STE 402			
Address				
		ORLANDO FL 32812		
			City/State and Zip Code	
		corvieserviceslle@gmail.com	n be used for future annual report notific	ation
For furth	ner information co	ncerning this matter, please ca	·	
Adhara	Vierma		407 218-2877 at ()	
	Name of	Person	Area Code Daytime	l'elephone Number
Enclose	d is a check for the	e 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 tadditional copy is enclosed)
	Mailing Address Registration So		Street Address: Registration Section	ion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

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CORVIE SERVICES LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.)'	
The Articles of Organization for this Limited Liability Company lorida document number $\frac{L19000249060}{L19000249060}$	were filed on OCTOBER 03rd 2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:	, , ,	
Principal office address MUST BE A STREET ADDRESS)		
The ipa office address WOST BE A STREET ADDRESS	<u> </u>	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
 If amending the registered agent and/or registered office a gent and/or the new registered office address here: 	iddress on our records, enter the na	me of the new regis
gent and/or the new registered write address here.		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
hereby accept the appointment as registered agent and agre	e to act in this capacity. I further a	igree to comply wi

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>	Name	Address	Type of Action
AMBR	VALERIA MARTINEZ VIERMA	3859 CLEARY WAY, ORLANDO FL 32828	
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			DChange
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change

	ation, enter change(s) here: (Attach	additional sheets, if necessary.)
AMENDING EFFECTIVE.	JANUARY 1st 2023	
 		
		
·		
· · · · · · · · · · · · · · · · · · ·		
		
E Effective data if other than the	JANUARY 1st 2021	(mational)
(If an effective date is listed, the date mu	lock does not meet the applicable statuto	(optional) ing or more than 90 days after filing.) Pursuant to 605.0207 (3)(ry filing requirements, this date will not be listed as the
If the record specifies a delayed effective record is filed.	ve date, but not an effective time, at 12:0	1 a.m. on the earlier of: (b) The 90th day after the
Dated September 01st	2023	
Dated	<i></i>	
	Signature et amember or authorized represe	entative of a member
JOSE F. CORDERO M	IARQUEZ MGR	

Filing Fee: \$25.00

Typed or printed name of signee