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C KHIZEY

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	A Mh	holding Servi	ces LC
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ANA M HANFORD		
		Name of Person	
	AMII HOLDING SERVIC	CES LLC	
	· · ·	Firm/Company	
	315 SE MIZNER BLVD	¥210	
		Address	
	BOCA RATON, FL 33431	2	
	CTPAPAL CHUNCHUL C	City/State and Zip Code	120
	STEVENACHURCHILL@ E-mail address: (to be used for future annual report not	ification)
For further information c	concerning this matter, please c	all:	
ANA M HANFORD		561 232-9163	
	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t			
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAIL	ANG ADDRESS:	STREET/COUR	HER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMH HOLDING SERVICES LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{10/10/2019}{1}$ and assigned Florida document number <u>L19000255963</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ANA M HANFORD	315 SE MIZNER BLVD ■	□ Add
		BOCA RATON , FL 33432	Add
			□ Remove
		CHANGE TITLE FROM CEO TO MGR	≅ Change
			Add
		-	□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			□ Remove
			□ Change
			Add
			□ Remove
			Change
			□ Add
			□ Remove
			□ Change

D. If amending a	iny other information, ent	ter change(s) here: 🅢	ttach additional sheets, j	f necessary.)
				
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				·
		•4•		•
	<u> </u>			
(If an effective dat Note: 1f the da		fic and cannot be prior to da not meet the applicable	te of filing or more than 90 day	(optional) es after filing.) Pursuant to 605.0207 (ts, this date will not be listed as t
	pecifies a delayed effect day after the record is f		effective time, at 12	:01 a.m. on the earlier of:
Dated OCTOL		2019		
	inc M	1	_ <	
	Signature	e of a member or authorized	I representative of a member	
AN	SA M HANFORD			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00