L19000 276801

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FEB 2 0 2020

S. YOUNG

COVER LETTER

Division of Corporations
SUBJECT: Legacy United Mutti-Services 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:
Sabring M CLark Name of Person
Firm/Company
11211 S. Military Trail apt. 22)
Boynton Beach, Fl. 334360 City/State and Zip Code
Single tary 1 @ hot mail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sabring M. Clark at (954) 729-304 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status □ Certified Copy

Mailing Address:

Registration Section

TO:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FI. 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Legacy United Multi- (Name of the Limited Liability Comps (A Florida Limited)	, <u>α ο ι</u>
The Articles of Organization for this Limited Liability Company Lorida document number L19000 276801	were filed on 11/06/2019 and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	pility company here:
he new name must be distinguishable and contain the words "Limited Liabi	
Enter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET ADDRESS</u>	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)	11211 S. Military Trail apt. 221 Bayriton Brach, Fl. 33436
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida

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
MGR	Sabeina M. Clark	11211 S. military Trail	🗆 Add
		Apt. 22	□ Remove
		Boynton Beach, Fl. 334	36 EChange
MGR		Keith T. Clark	□Add
		11211 S. M.l. tan/7	Ta. Remove
	APT221 (BOYN TO N BEACH, FI.		
			□Add
			□Remove
			□Change
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