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COVER LETTER

O: Registration Section Division of Corporations	
UBJECT: Select Property Maintenance Services LLC Name of Limited Liability Company	
he enclosed Articles of Amendment and fee(s) are submitted for filing.	
lease return all correspondence concerning this matter to the following:	
Name of Person	
Select Property maintenance	
DO BOX 3/62 Address	
Spring Hul FC 346/1 City/State and Zip Code SPM tampabay Camail. Com E-mail address: (16 be used for future annual report notification)	
or further information concerning this matter, please call:	
Name of Person Name of Person Name of Person Name of Person Area Code Daytime Telephone Number	
inclosed is a check for the following amount:	
S25.00 Filing Fee S30.00 Filing Fee SCertificate of Status Certified Copy (additional copy is enclosed) S55.00 Filing Fee SCERTIFICATE OF Status ScIPPING COPY (additional copy is enclosed)	
Mailing Address: Registration Section Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liahitaw Company as it nov	v appears on our records,)	ces Ll	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Con	ពាគ្រធិពីទូ)		
The Articles of Organization for this Limited Liability Company were filed Florida document number	ten 11/25/19	and assig	gned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability comp	pany here:		
The new name must be distinguishable and contain the words "Limited Liability Compan	on Walking discourage and 60 1 7 mm and also	ahhayyaalaa Ul. I	
Enter new principal offices address, if applicable:	y, the designation LLC or the	anoreviation t.t.	(,
(Principal office address MUST BE A STREET ADDRESS)	MA	- 33	
		<u></u>	•
Enter new mailing address, if applicable:	UX	구: 3:	· · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	N V	9	
B. If amending the registered agent and/or registered office address or agent and/or the new registered office address here:	n our records, <u>enter the na</u>	me of the new	registered
Name of New Registered Agent:			
New Registered Office Address:			
, · · ;	nter Florida street address , Florida	,	
City		Zip 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
AMBR	Willie Mcneal	11276 Fool Duck Ave	_ SAdd
		11276 Fool Duck Ave Weeki Wadnee, FL 3461	<u>3</u> □Remove
			□Change
			□ Add
			□Remove
			□Change
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(If an effective Note: 1)	e date, if other than the date of filing:
ne record ord is file	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
Dated _	november 6th, 2023.
	Signature of a member or authorized representative of a member
	Micole McNeo/ Typed or printed name of signee

Filing Fee: \$25.00