

120 000053062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

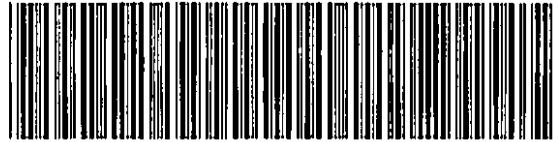
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

2022 JUL 27 AM 8:15

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PS MARKETING & 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:

PATRICIA CASTRO

Name of Person

Firm/Company

552 WILDWOOD LANE EAST

Address

DEERFIELD BEACH FL 33442

City/State and Zip Code

patriciaveronicacastro@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PATRICIA CASTRO

754 252-3689
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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
(additional copy is enclosed)

Mailing Address:

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, FL 32303

FILE

2022 JUL 27 AM

~~SECRETARY OF STATE~~
TALLAHASSEE.

The Articles of Organization for this Limited Liability Company were filed on 02/17/2020 and assigned Florida document number 1.20000053062

A. If amending name, enter the new name of the limited liability company here:

552 WILDWOOD LANE EAST

DEERFIELD BEACH FL 33442

552 WILLOW LANE EAST

DEERFIELD BEACH FL 33442

Enter Florida street address

Florida

City

Zip Code

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>	<u>Address</u>	<u>Type of Action</u>
MGR	ROLANDO SALAS	552 WILDWOOD LANE EAST	<input checked="" type="checkbox"/> Add
		DEERFIELD BEACH, FL 33442	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JORGE DAVALOS	5955 NW 105TH COURT	<input type="checkbox"/> Add
		DORAL FL 33178	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MARK BLOCK	552 WILDWOOD LANE EAST	<input checked="" type="checkbox"/> Add
		DEERFIELD BEACH , FL 33442	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2022 JUL 27 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FL

2022 JUL 27 AM 8:16
SECURE MAIL BOX
TALLAHASSEE, FL

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.


Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00