1200000 98234

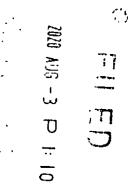
(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	(3/3/2

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LLCAmend



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 18, 2020

ANGELA MCKAY 1530 SOUTHWOOD PLACE SAINT AUGUSTINE, FL 32084

SUBJECT: MCKAY'S MAINTENANCE & MORE, LLC

Ref. Number: L20000098234

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Chapter 605, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore Regulatory Specialist II

Letter Number: 820A00012116

RECEIVED

AUG 0 3 2020

COVER LETTER

TO:

Registration Section

Division of C	Corporations			
	Y'A MAINTENANCE & MORE,	LLC		
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sul-	omitted for filing		
		<u> </u>		
Please return all corre	spondence concerning this matter	to the following:		
	ANGELA MCKAY			
		Name of Person	-	
	MCKA Y'S MAINTENAN	ICE & MORE, LLC		
	Firm/Company			
	1530 SOUTHWOOD PLACE			
	Address			
	ST AUGUSTINE, FL 320	84		
		City/State and Zip Code		
15 . e. d		to be used for future annual report no	oblication)	
For further informatio	n concerning this matter, please c	all:		
ANGELA MCKAY		904 669-2578		
Nam	e of Person		me Telephone Number	
	r the following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,	
brown by	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing Add</u>	ress:	Street Address:		
Registratio	n Section	Registration S	Registration Section	
Division of P.O. Box 6	Corporations		Division of Corporations The Centre of Tallahassee	
	e, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Con	npany as it now appears on our records.) ed Liability Company)	u- .
(A Florida Limite	ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	my were filed on 04/07/2020	and assigned
lorida document number 1.20000098234		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited li	ability company here:	
		~* (
he new name must be distinguishable and contain the words "Limited Li-	ability Company," the designation "LLC" of	r the desireviation "L.L.C."
Enter new principal offices address, if applicable:	,	= :7
Principal office address MUST BE A STREET ADDRESS)		. 6)
THE PARTY OFFICE MADE AS THE LET ADDRESS!		 6 17
		. U : 7
	:	=
Inter new mailing address, if applicable:		· 0
Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
d. If amending the registered agent and/or registered office gent and/or the new registered office address here:	e address on our records, <u>enter the</u>	e name of the new regi
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	da

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 = 'Mañager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	RYANMCKAY	1530 SOUTHWOOD PLACE	■ ∆dd
		ST AUGUSTINE, FL 32084	□Remove
			□Change
	******		D\dd
			□Remove
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove

	ADDING RYAN MCKAY AS AN AUTHORIZED MEMBER
•	
•	
-	
,	
-	
-	
Effect	ve date, if other than the date of filing:
it an ei: <u>Note:</u>	ective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
	ent's effective date on the Department of State's records
е гесог	d 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
rd is fi	ed.
Dated	07/05/20 . 2020.
Juce	
-uu	(Amal Park)
	Sunature of a regular or authorized representative of a member
Juled	Angela Packay Sunature of a member or authorized representative of a member

Filing Fee: \$25.00 PATS