

L20000155871

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

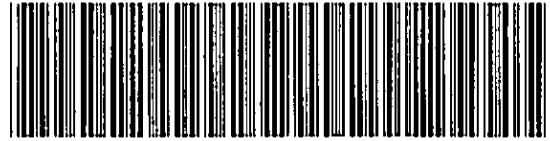
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800358078508

RECEIVED

JAN 19 2021

01/20/21--01003--004 \*\*25.00

FILED

2021 JAN 19 PM 2:18

SECRETARY OF STATE  
TALLAHASSEE, FL

US  
3/2/21

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SCOOBY-LANDSCAPING & MAINTENANCE "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:

CARMEN ROMERO

Name of Person

A&A MUL-T-SERVICES INC

Firm Company

79 LAS BRISAS WAY

Address

KISSIMME, FL 34743

City/State and Zip Code

aamultiservices@gmail.com

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

SECRET  
TALLAHASSEE, FL

2021 JAN 19 PM 2:18

FILED

For further information concerning this matter, please call:

JOHNNY MONTALVO

914

826-1881

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



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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

FILED  
2021 JAN 19 PM 2:18  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED  
2021 JAN 19 PM 2:18  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED  
2021 JAN 19 PM 2:18  
SECRETARY OF STATE  
TALLAHASSEE, FL

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JANUARY 14, 2021

JOHNNY MONTALVO

Typed or printed name of signee