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COVER LETTER

Division of Cor				
SUBJECT:		tonal Sevi	vices LIC	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Tracie	E. Dadlen Name of Person		
		Eira Company		
	3314 N.	Ridge Road		20 8
	Tallahas	City/State and Zip Code Ovial@CMail to be used for future annual report noti	5302	
	E-mail-address: (to be used for future annual report noti	icom	開出
For further information c	oncerning this matter, please ca			# 32 B
Vac:	E Ordley f Person	at () (850) Area Code Daytim	296-553 re Telephone Number	71
Enclosed is a check for the	ne following amount:			
Ø \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing F Certificate of Certified Copy (additional copy i	Status &
Mailing Address Registration S Division of C	Section Corporations	Street Address: Registration Se Division of Co	porations	
P.O. Box 632	. 1	The Centre of T	ananassee	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

T7 H Jan. for al Ser	rices CC	
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	<u>rs on our records.</u>)	
The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L2000 0223</u> 4 <i>6</i> 7	July 28 and a	ssigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company he	ere:	
The new name must be distinguishable and contain the words "Limited Liability Company," the d	lesignation "LLC" or the abbreviation " \text{\text{\text{\text{C}}}}	rrrc
Enter new principal offices address, if applicable:	(/) 10	·
Principal office address MUST BE A STREET ADDRESS)		• :
	4 	-<
Enter new mailing address, if applicable:	 ———————————————————————————————————	
Mailing address MAY BE A POST OFFICE BOX)	T.J.	
B. If amending the registered agent and/or registered office address on our ragent and/or the new registered office address here:	ecords, <u>enter the name of the n</u>	ew registere
Name of New Registered Agent:		
New Registered Office Address:		
Enter Flor	ida 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.

Cuv

Zip Code

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
4MBR	TAA Janitor al Source	3314 N. Ridge Road Tallahassee, Fla 3230	<u></u> □Add 5
•	Track E. Dudley	·	□Remove
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effective date is li :: If the date in	ther than the date sted, the date must be spe serted in this block do e date on the Departn	ecific and car ses not mee	nnot be prior t t the applica		r more than 90 (ig.) Pursuant to 60	
ord specifies a o	delayed effective date,	but not an	effective tin	ne, at 12:01 a.	m. on the earli	er of: (b)	The 90th day aft	er th
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	Signat	ure of a men	nber or author	rized representa	tive of a member	r		
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