

L20 000 263451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

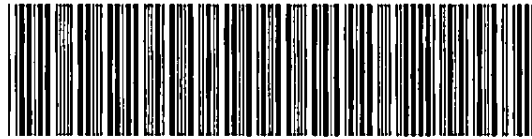
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2020 OCT 28 PM 12:00

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 28, 2020

BETSY JIMEMEZ
49 BUD FIELD DR
PALM COAST, FL 32137

SUBJECT: BETSY'S NOTARY SERVICES, LLC
Ref. Number: L20000263451

We have received your document for BETSY'S NOTARY SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE LIST ~~THE~~ ^{TITLE} FOR MEMEBR LISTED: MGR, AMBR, AR, ETC.

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.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 420A00021513

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

9 11 20

RE: Betsy Jimenez – Betsy's Notary Services, LLC

49 Bud Field Drive

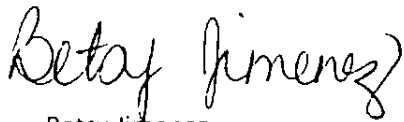
Palm Coast, FL 32137

Phone : 561.503.3353

To Whom It May Concern,

Please amend my Articles of Organization to include my name Betsy Jimenez under Authorized Person Detail. Please call or email me should you require more information.

Thanks,

A handwritten signature in black ink that reads "Betsy Jimenez". The signature is written in a cursive, flowing style.

Betsy Jimenez

Betsysnotaryservices@gmail.com

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Betsy's Notary Services, LLC

CONFIDENTIAL - 21 2:50

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on August 25, 2020 and assigned Florida document number L20000263451.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

Civ

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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Please add Betsy Jimenez under Authorized Person Detail

FILED 2020 SEP 12 2:50

E. Effective date, if other than the date of filing: September 10, 2020 **(optional)**

(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)

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.

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.

Dated September 10, 2020

Betsy Jimenez
Signature of a member or authorized representative of a member

Betsy Jimenez
Typed or printed name of signee