

**L20000299 991**

(Requestor's Name)

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(Business Entity Name)

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2020 SEP 21 PM 6:26

FILED

OCT 29 2020

S. YOUNG

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Hernandez Professionals Services

\_\_\_\_\_  
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:

Zoraida C Hernandez

\_\_\_\_\_  
Name of Person

Hernandez Professional Services, LLC

\_\_\_\_\_  
Firm/Company

1206 Gema Place

\_\_\_\_\_  
Address

Winter Springs, FL 32708

\_\_\_\_\_  
City/State and Zip Code

hernandezproservices@gmail.com

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

For further information concerning this matter, please call:

Zoraida C Hernandez

407 920-4945

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Hernandez Professionals Services, LLC

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

**FILED**  
2020 SEP 21 PM 6:27  
CLERK OF CIRCUIT COURT  
IN AND FOR THE COUNTY OF  
DADE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 09/11/2020 and assigned  
Florida document number 1241635.

This amendment is submitted to amend the following:

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

Hernandez Professionals Services, LLC

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:

1206 Gema Place

**(Principal office address MUST BE A STREET ADDRESS)**

Winter Springs, FL 32708

Enter new mailing address, if applicable:

P.O. Box 195155

**(Mailing address MAY BE A POST OFFICE BOX)**

Winter Springs, FL 32719

**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:

Zoraida C Hernandez

New Registered Office Address:

1206 Gema Place

*Enter Florida street address*

Winter Springs

*City*

, Florida 32719

*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

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>
Mr	Ricardo L. Hernandez	P. O Box 195155 Winter Springs, FL 32719	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Mrs	Zoraida C Hernandez	P.O. Box 195155 Winter Springs, FL 32719	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

My company should be Hernandez Professionals Services, LLL as a Corporation S not a Partnership as stated in  
the document that I received from the IRS asking for me fill form 1065 Return on Partnership Income .

Also I do not have the articles of incorporation.

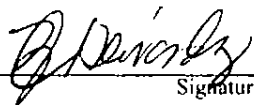
**E. Effective date, if other than the date of filing:** 09/11/2020 **(optional)**

(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 14, 2020



Signature of a member or authorized representative of a member

Zoraida C. Hernandez

Typed or printed name of signee