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## COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Cor			
end in		RVICES CONTRACTORS, I.	LC	
SUBJEC	-1;	Name of Lim	ited Liability Company	
The enct	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		BRENDA PLAZA		
		·	Name of Person	
		VELOCE ACCOUNTAN	TS, LLC	
			Firm/Company	
		906 TAYLOR LN		
		<del></del>	Address	
		LEHIGH ACRES, FL 339	36	
			City/State and Zip Code	<del></del>
		VELOCEACCOUNTANTO	@AOL.COM to be used for future annual report noti	Parations
For furth	er information c	oncerning this matter, please co		illation)
BREND	A PLAZA		239 265-4690 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed	l is a check for th	ie following amount:		
<b>■</b> \$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		Street Address:	ation
	Registration S Division of C		Registration Se Division of Cor	
	P.O. Box 632	•	The Contro of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MULTI SERVICES CONTRACTORS, LLC

(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on ou Liability Company)	r records.)			
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.20000305386}{1.20000305386}$ .	were filed on	0 and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company here:				
N/A					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	on "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	1110 TURTLE CREEK	C DR			
(Principal office address MUST BE A STREET ADDRESS)	APT- 111				
	NAPLES, FL 34110-2206				
Enter new mailing address, if applicable:	1110 TURTLE CREEK	CDR			
(Mailing address MAY BE A POST OFFICE BOX)	APT-111				
	NAPLES, FL 34110-22	106			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records  Enter Florida succ				
		, Florida			
	City	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 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>	Name	Address	Type of Action
AMBR	JAVIER GUEVARA	1440 GOLDEN GATE W	□Add
		NAPLES, FL 34120	
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
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			Change
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Effective date, if other than the date of filing:										
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Filing Fee: \$25.00