

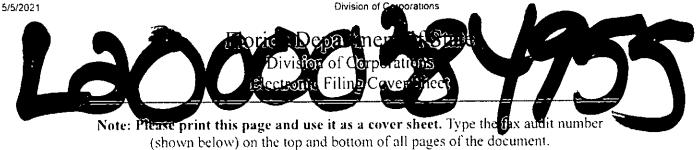
05/5/2021

12:26 PM

TO:18506176383

FROM: 4073703120

Division of Corporations



(((H210001817763)))



H210001817763ABC0

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: LARSON ACCOUNTING AND CONSULTING SERVICES LLC Account Name

Account Number : I20160000067 : (407)370-3686 Fax Number : (407)370-3120

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: TAXPREPARER@LARSONACC.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PP SERVICES CARRIER LLC

Certificate of Status	0
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Estimated Charge	\$25.00

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TO:	Registration Se Division of Cor			:		ngi.	•
CHRIE	PP SERVIO	CES CARRIER					
SOBJE	CI		Name of L	imited Liability Company			
The enc	losed Articles of	Amendment an	id fee(s) are s	ubmitted for filing.			
Please r	eturn all correspo	ondence concer	ning this matt	er to the following:			
		CAROLIN	E G LARSO	N			
				Name of Person			
LARSON ACCOUNTIN				NG GROUP			
				Firm/Company	-		
		7901 KINO	GSPOINTE S	UITE 17			
				Address			
		ORLAND	O. FL 32819				
				City/State and Zip Code			
		TAXPREPA					
			E-mail addres	s: (to be used for future annua	l report notificatio	n)	
For furt	her information of	concerning this	matter, please	e call:			
CAROLINE G LARSON		407 37 at ()	70 3686				
	Name o	of Person		Area Code	Daytime Telo	phone Number	
Enclose	ed is a check for t	he following an	nount:				
∑ \$25	5.00 Filing Fee	S30.00 F Certific	filing Fee & cate of Status	S55.00 Filing Fee Certified Copy (additional copy is en		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addre	<u>ss:</u>		Street A	vddress:		

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TO:18506176383

FROM: 4073703120

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H21000181776 3)))

PP SERVICES CARRIER LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L. Florida document number L20000384955			and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liah	ility company here:	
N/A			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	N/A	
(Principal office address MUST BE A STREE	(TADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	N/A	
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:	N/A		\$ G
New Registered Office Address:			2 0
-		Enter Florida street address, 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 Changing Registered Agent, Signature of New Registered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records: (((H21000181776 3)))

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	DOS SANTOS, THOMAS F	6431 SWANSON ST.	
		WINDERMERE, FL 34786	■Remove
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			Remove
			[]Change
			□Add
			Change
			□Add
			Remove
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			Remove
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ffective date, if other than the data an effective date is listed, the date must be fote: If the date inserted in this bloc ocument's effective date on the Department.	ate of filing: e specific and cannot k does not meet the	e applicable sta	of filing or more the tutory filing requ	(option: in 90 days after fili tirements, this da	ing.) Pursuant to 60	95.0207 (3)(E sted as the
record specifies a delayed effective of is filed.	late, but not an eff	ective time, at	12:01 a.m. on the	carlier of: (b)	The 90th day aft	er the
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		A)				
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