

L21000060323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

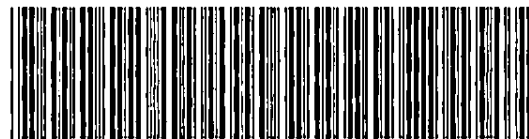
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Time 3:30pm

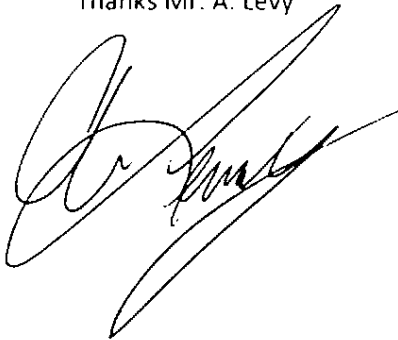
Date: 03/04/2021

Reason: Corrections on my LLC

To whom it may concern, I Alphonso Levy is writing this letter to state that I need my name on my LLC corrected. It was supposed to been A&I appliances repairs and sales and it ended up being Levy repairs and sales. I'm thinking that it was auto corrected on the forms. I don't know What happened. But can you all please fix it to the correct thing. Please and thanks.

If you have any questions please fill feel to reach me @ 561-543-1003

Thanks Mr. A. Levy

A handwritten signature in black ink, appearing to read 'Alphonso Levy', with a large, sweeping flourish extending from the bottom right.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Alphanso Levy LLC
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:

Alphanso Levy
Name of Person

A-I Appliances Repair and Sales
Firm/Company

3420 45th St. Ste 12
Address

West Palm Beach FL 33407
City/State and Zip Code

Nad2133407@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alphanso Levy
Name of Person

at (361) 856-8918
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**

Alphonso Levy LLC
(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 02/3/2021 and assigned Florida document number L21000060323.

This amendment is submitted to amend the following:

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

A-I Appliances Repairs and Sales 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:

(Principal office address MUST BE A STREET ADDRESS)

3420 45th St Ste 12
West Palm Bch
Fl. 33407

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8521 Canterbury Dr S.
Bonnie Bch Fl.
33407

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

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

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>
MGR	Alphonso Levy	3420 45th St. Ste 12	<input checked="" type="checkbox"/> Add
		W.P.B. R. 33407	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Ingrid Levy	3420 45th St. Ste 12	<input checked="" type="checkbox"/> Add
		W.P.B. R. 33407	<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
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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3/4/2021

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.

Dated March 24 / 2021

Signature of a member

Signature of a member or authorized representative of a member

Alphonso heavy

Typed or printed name of signee



Florida Limited Liability Company Filing Payment

Pending Approval: ALPHANSO LEVY

Thank you for filing your Florida Limited Liability Company online.

Your confirmation/tracking number is 500359491275.

[File another Florida Limited Liability Company.](#)

[File a different document](#)