## L9100009639974

(Re	questor's Name)	
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## **COVER LETTER**

La Harrison	of Limited Liability Company
All = Avio	re submitted for filing.  natter to the following:
12425 10657	Name of Person  ERVICE LLC  Firm/Company
12425 10657 Lango FL 33773	R. Address
727 698-9954	City/State and Zip Code  ail.com  : (to be used for future annual report notification)  call: at (
	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee,  Certificate of Status ₹ □ Certified Copy (additional copy is enclosed)
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

8810 WATERWAY DRTAMPA, FL 33635

(Name of the)	Limited Liability Company as i (A Florida Limited Liabilit	it now appears on our records.) y Company)			
The Articles of Organization for this Limite Florida document number L21000067224	ed Liability Company were	filed on 02/08/2021	and assigned		
This amendment is submitted to amend the	following:				
A. If amending name, enter the new nam		ompany here:			
The new name must be distinguishable and contain the	he words "Limited Liability Com	tpany," the designation "LLC" or the			
Enter new principal offices address, if app	nlicable				
(Principal office address MUST BE A STR	FFT ADDRESS		<del></del>		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFIC			<del></del>		
E A POST OFFIC	<u>E BOX)</u>				
B. If amending the registered agent and/or	registered off				
B. If amending the registered agent and/or agent and/or the new registered office addr	ress here:	on our records, enter the nan	ne of the new registered		
Name of New Registered Agent:	AVILES, ANGEL L, JR				
New Registered Office Address:	8810 WATERWAY DR.				
<u> </u>	Enter Florida street address				
	Tampa	Florida 336	535		
New Registered Agant's Single	City	, Fiorida <u></u>	Zip Code		
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as region being filed to merely reflect a change in the company has been notified in writing of this	istered agent as provided	ance of my auties, and I am fo	amiliar with root		
		dered Agent, Signature of New Regis	FD 2:25		

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

Title	Name	<u>Address</u>	
AMBR	A VILES, ANGEL L, JR		Type of Action
		8810 WATERWAY DRTAMPA, FL 33635	——_ ≅Add
			□Remove
MGR	AVILES, ALVIS M, SR	12425 108th St. 7	□Change
		12425 106th St. Largo Fl. 33773	≅Add
			□Remove
			[]Change
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