## L21000128846

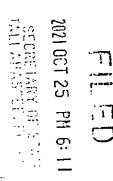
(Requestor's Name)	-
(Address)	_
(Address)	-
(City/State/Zip/Phone #)	-
PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	-
Certified Copies Certificates of Status	•
Special Instructions to Filing Officer:	
J. HORNE NUV - 2 2021	

Office Use Only



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## **COVER LETTER**

	gistration Servision of Cor		•	
		aning Services, LLC.	,	
SUBJEC 1:	·	Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub-	mitted for filing.	
		ndence concerning this matter	-	
		Dariel Alonso		
			Name of Person	<del></del>
			Firm/Company	
		6870 w 7 ave apt 20		
			Address	
		Hialeah, FL		
		33014	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notific	ation)
For further	information c	oncerning this matter, please ca	all;	
Jasmine Ho	ernandez		786 583-5826 at ( )	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	ne 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)	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addres		Street Address: Registration Sect	ion

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 OCT 25 PM 6: 11

Alonzo Cleaning Services, LLC.

SECRETARY OF STATE TALLAHASSEE, FL HO

(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 C	Company were filed on 03-18-2021	and assigned
Florida document number L21000128846	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
On My Way Services, LLC.		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registere	office address on our records enter th	
agent and/or the new registered affice address here:	a once address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	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>	Address	Type of Action
			□Add
			Remove
		<del> </del>	Change
			Remove
			Change
			Remove
			🗀 Add
			□Remove
			☐ Change
			□Add
			☐ Remove
			Change
			□Add
			Remove
			□Change

To provide superior transportation	on of vehicles, freight, and equipment. On My Way Services, LLC, is dedicated to
bringing forth high-ranking cust	omer service, valueable, and cost efficient services.
·····	
·	
tive date, if other than the da ffective date is listed, the date must be If the date inserted in this block	ate of filing: (optional) e specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 k does not meet the applicable statutory filing requirements, this date will not be list
ment's effective date on the Depa	artinent of State's records.
ard specifies a delayed effective d	iate, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afte
iled.	and our not an effective time, at 12101 and, on the earlier of, (o) The 70th day and
October 19	2021

Filing Fee: \$25.00