W210020652

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COVER LETTER

TO: Registration Division of	n Section Corporations	
	AM MULTISERVICES LLC	
SUBJECT:	nited Liability Company	
The enclosed Articles	s of Amendment and fee(s) are su	bmitted for filing.
Please return all corre	espondence concerning this matte	r to the following:
	CLAUDIA MEJIA	
		Name of Person
	KOSS LAW FIRM	
		Firm/Company
	1453 W. BUSCH BLVD	
		Address
	TAMPA, FL. 33612	
		City/State and Zip Code
	claudia.kosslawfirm@gma	
For further information	E-mail address: on concerning this matter, please	
CLAUDIA MEJIA		813 200-6103at ()
Nar	ne of Person	Area Code Daytime Telephone Number ;
Enclosed is a check for	or the following amount:	
■ \$25,00 Filing Fee	_	☐ \$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)
<u>Mailing Ado</u> Registration Division o		Street Address: Registration Section Division of Corporations
P.O. Box 6	5327	The Centre of Tallahassee
Tallahasse	e. FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LP TEAM MULTISERVICES 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 $\frac{05/03/2021}{1}$ and assigned Florida document number L21000206032 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC," 10668 NEW EAST BAY ROAD, #209 Enter new principal offices address, if applicable: GIBSONTON, FLORIDA 33534 (Principal office address MUST BE A STREET ADDRESS) 10668 NEW EAST BAY ROAD, #209 Enter new mailing address, if applicable: GIBSONTON, FLORIDA 33534 (Mailing address MAY BE A POST OFFICE BOX) 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

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

New Registered Agent's Signature, if changing Registered Agent:

company has been notified in writing of this change.

City

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
MGR	JORGE REYES PRADILLA	10668 NEW EAST BAY ROAD, #209	= Add
		GIBSONTON, FLORIDA 33534	□Remove
AR	July V. Zapatu	11102 Spring Poil Riverview, Ft 338	□Change <u>†</u> [I/Cl/ <u>†</u> □Add
		Riverview, Ft 335	7 Alekemove
			□Change
			□Add
			□Remove
		 	□Change
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an effective date is listed, the date mu <u>iote:</u> If the date inserted in this b ocument's effective date on the L	ist be specific and olock does not me	cannot be prior eet the applic	able statutory		ays after filing.)	will not b	
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record specifies a delayed effecti-	ve date, but not a	ın effective t	ime, at 12:01 a	.m. on the earlie	er of: (b) The	90th day	after th
ris med.							
Anonst 11		2021					
Anonst 11		2021	·				
Anonst 11							
	Signature of a vi		orwed represent	ative of a member	-		_

Filing Fee: \$25.00