A21 0000229890

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O: Registration S Division of Co			
	ffordable Veterinary Services, I	J.C	
JBJECT:	·	•	
	Name of Lim	ited Liability Company	·
ne enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
ease return all corresp	ondence concerning this matter	to the following:	
	Leslie L. Hinton		
		Name of Person	
	Florida Affordable Veteri	·	
		Firm/Company	
	1744 West Shores Road		
		Address	
	Melbourne F1, 32935		
	loren_hinton@yahoo.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifica	ation)
or further information of	concerning this matter, please c	all:	
eslie L. Hinton		321 961-2985	
Name o	of Person	at () Area Code	elephone Number
nclosed is a check for t	he 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 Addre Registration Division of C P.O. Box 633 Tallahassee.	Section Corporations 27	Street Address: Registration Section Division of Corpo The Centre of Tal 2415 N. Monroe S Tallahassee, FL 33	orations lahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Florida Affordable Veterinary Services, LLC

2021 SEP -7 PM 7: 57

(Name of the Limited Liability Company as it now appears on our Records) AFV OF (A Florida Limited Liability Company) TALLAHASSEE. The Articles of Organization for this Limited Liability Company were filed on _______ and assigned L21000229890 lorida document number his amendment is submitted to amend the following: 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," Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cirv lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability ompany has been notified in writing of this change.

If Changing Registered Agent. Signature of New Registered Agent

f amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added r removed from our records</u>:

AGR = Manager AMBR = Authorized Member

<u>'itle</u>	<u>Name</u>	Address	Type of Action
AMBR	Leslie L. Hinton	1744 West Shores Road	
			□Add
		Melbourne F1, 32935	
			Remove
			~~
AMDD	Trevor T. Zachariah	17 (1 W. o. Ch D)	
AMBR		1744 West Shores Road	□Add
		Melbourne FL 32935	
			□Remove
	, e		□Add
			□p
			□Remove
			□Change
			□Change
		- <u></u>	□Remove
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			□Remove
			□Change
			

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Tective date, if other than the dan effective date is listed, the date must be telegible. If the date inserted in this block current's effective date on the Department.	be specific and cannot be prior to ck does not meet the applical	date of filing or more than 9 de statutory filing require	(optional) 0 days after tiling.) Pursuant to 605.0207 ments, this date will not be listed as
ecord specifies a delayed effective is filed.	date, but not an effective tim	ie, at 12:01 a.m. on the ea	rlier of: (b) The 90th day after the
September 1	2021		
ited		_ ·	
•	teld 3	Ji~	
S	ignature of a member or author	ized representative of a mem	ber

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