## 121000241963

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	porations					
ASHLEY S	TAFFING SERVICES LLC	4				
SCBJECT.	Name of Lim	ited Liabitity Company				
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.				
	ndence concerning this matter					
r tease return an correspo	indefice concerning and market	iv the tenoung.				
	ASHLEY G ROSS					
		Name of Person				
ASHLEY STAFFING SERVICES LLC						
		Firm-Company				
	2515 GARFIELD ST					
		Address				
	HOLLYWOOD, FL 33020			, ;;	2027	
	City/State and Zip Code		(T)	2022 JUN 27		
	ASHLEYGAIL990@GMA	H.,COM to be used for future annual report notif	ionti an )	<u>소</u> :	127	-
For further information e	n-man address. I		(Cation)	SOUTH THE	AM 11: 36	M
ASHLEY ROSS		954 604-9735		<u>न</u> ्याः । ।	1: 36	
Name o	f Person	at ()	Telephone Number		-	
Enclosed is a check for the	ne following amount:					
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Fi Certifica Certified (additional	te of Sta Copy	us &	
Mailing Addres Registration 5	Section	Street Address: Registration Sec				
Division of C P.O. Box 632	•	Division of Cor The Centre of T				
1	-					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AXIS STAFFIN	16- SERVICES AR	-
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our reco Liability Company)	rds.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000241963</u> .	were filed on 05/24/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
ASHLEY PRO-MANAGEMENT SERVICES. LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL	
Enter new principal offices address, if applicable:		2022
Principal office address MUST BE A STREET ADDRESS)		
		727
Enter new mailing address, if applicable:	P.0 BOX 223742	SSSS R TO
Mailing address MAY BE A POST OFFICE BOX)	HOLLYWOOD FL	36
	33022	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		r the name of the new regi
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	ess
		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 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
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			□ Change
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ffective date, if other than the dat an effective date is listed, the date must be lote: If the date inserted in this block ocument's effective date on the Depar	does not meet the appli	or to date of filing or cable statutory fil		n <b>al)</b> iling.) Pursuant to date will not be	605.020 listed a
record specifies a delayed effective da is filed.	ite, but not an effective	time, at 12:01 a,n	n, on the earlier of: (b)	The 90th day	after the
JUNE 06		·			
ASHEEN GROSS	nature of a member or am		ar a f n an amh n		<del></del>

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