

L21000330278

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09/08/2021  
JH

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** PALM BEACH LANDSCAPE SERVICES, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HUMBERTO PASQUAL MIGUEL

Name of Person

Firm/Company

3792 DALE RD

Address

PALM SPRINGS, FL, 33406

City/State and Zip Code

NEWLIFEINSURANCESVS@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CATARINA FRANCISCO MIGUEL

561 335-3196  
at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:**

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

**Street Address:**

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

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SECRET

SECRETARY OF STATE  
15. AMBASSADOR, P...

**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>	<u>Address</u>	<u>Type of Action</u>
MGR	CATARINA FRANCISCO	3792 DALE RD	<input checked="" type="checkbox"/> Add
		PALM SPRINGS, FL 33406	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	HUMBERTO PASQUAL	3792 DALE RD	<input type="checkbox"/> Add
		PALM SPRINGS, FL 33406	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**