## L21000339470

(Requestor's Name)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJEC	R & E MA	INTENANCE SERVICES LLO	C	
SUBJEC	√1: <u></u>	Name of Lim	ited Liability Company	<del></del>
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Diaz Garcia Rene E		
		rene diaz	Name of Person	
			Firm/Company	
		1917 riverside dr aptB		- 1
			Address	
		fort lauderdale 33312 FL		
			City/State and Zip Code	
		alianzaserver@gmail.com		
			o be used for future annual report notific	ration) ~ ·
For furth	er information co	oncerning this matter, please ca	all;	
rene dia:	z.	KAN -	7862772896	
	Name of	Person	Area Code Daytime	Felephone Number
Enclosed	l is a check for th	e following amount:		
□ \$25.	00 Filing Fee	S30.00 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R & E MAINTENANCE SERVICE	ES LLC		
(Name of the Limit	ed Liability Comps (A Florida Limited	iny as it now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited Li Florida document number L21000339470	ability Company	were filed on 07/21/2021	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
REEP SERVICES LLC			
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if application	able:	1917 riverside dr apt B	
(Principal office address MUST BE A STREET ADDRESS)		33312 fort lauderdale FL	1
	<u> </u>		
		_	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE I	8 <i>0X</i> )		
			, , , , , , , , , , , , , , , , , , ,
B. If amending the registered agent and/or re agent and/or the new registered office addres	egistered office : s here:	address on our records, <u>en</u>	ter the name of the new register
Name of New Registered Agent:	Diaz Garcia Re	ne E.	
New Registered Office Address:	1917 riverside		
		Enter Florida street ad	dress
	fort lauderdale	FL	Florida 33312
		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
			□Add
			□Remove
			□Change
			□Add
		□Remove	
			Change
			⊡Add
			 ☐Change
			□Add
			□ Remove
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rective date, if other than the date of filing:  In effective date is listed, the date must be specific and cannot be prior to date of filing or more that the date inserted in this block does not meet the applicable statutory filing requestions are effective date on the Department of State's records.	(optional) an 90 days after filing.) Pursuant to 605.02 uirements, this date will not be listed
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the s filed.	e earlier of: (b) The 90th day after the
ted,	