

K21 000346186

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

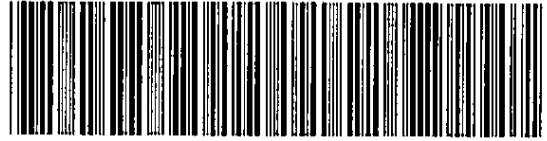
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/13/21--01040--022 **25.00

2021 OCT 13 PM 3:43



2021 OCT 18 PM 1:41

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 22, 2021

SAID HERNANDEZ
344 N. ROYAL POINCIANA BLVD
MIAMI SPRINGS, FL 33166

SUBJECT: EVOLUTION SERVIV LLC
Ref. Number: L21000346186

We have received your document for EVOLUTION SERVIV LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers
Regulatory Specialist II

Letter Number: 121A00022861

COVER LETTER

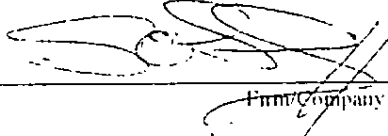
TO: Registration Section
Division of Corporations

SUBJECT: Evolution Servi 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:

Said Hernandez
Name of Person


Print/Company

344 N Royal Poinciana Blvd
Address

Miami Springs FL 33166
City/State and Zip Code

saidaduanas@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Said Hernandez at (786) 653-3046
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Evolution Servis 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 08/02/2021 and assigned Florida document number L21000346186.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Evolution Servis LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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

_____, 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 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>
<u>MGR</u>	<u>Said Hernandez</u>	<u>344 N Royal Poinciana Blvd</u> <u>Miami Springs, FL, 33166</u>	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		<u>Said Lorenzo Hernandez Gonzalez</u>	<input checked="" type="checkbox"/> Change
<u>MGR</u>	<u>Haister M Arricche</u>	<u>344 N Royal Poinciana Blvd</u> <u>Miami Springs, FL, 33166</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change