121000495322

(Re	questor's Name)	_
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	
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SECHE FARY OF STATEMS
DIVISION OF CORPORATIONS
22 APR 13 PH 3: 19

T. MATTHEWS MAY - 4 2022



RECEIVED

2022 APR 13 AM 11:53

SECRETALIA STATE TALLAHASSEE, FL

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 30, 2022

FERNANDO A LAZCANO 11906 LARK SONG LOOP RIVERVIEW, FL 33579

SUBJECT: 3FS NATIONWIDE SERVICES LLC

Ref. Number: L21000495322

We have received your document for 3FS NATIONWIDE SERVICES 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):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document. We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tekayla T Matthews OPS

Letter Number: 622A00007381

COVER LETTER

TO:

Registration Section

Division of Co	rporations		
SUBJECT:		IDE SERVICES L	LC
	(vanc of ising	ned charmy company	
The country and Amelial conf.	· A L	and a state of the state of	
The enclosed Articles of	Amendment and fee(s) are sub	milied for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		. /	
	TERNAN!	Name of Person	
		Name of Person	
	3F's N	INTIONWIDE SERVICE Firm/Company	FS
		Firm/Company	
	11900	alak Caul O	
	(1 100	P LNEK SUNG LOOP	
	2		
	KIVERVIEW	FL 33579 City/State and Zip Code	
	<i>(</i> 1	City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	ification)
For further information of	concerning this matter, please co		
FERNANDO 1	+ LAZEANO	at (<u>786</u>) <u>252</u> Area Code Daytin	8672
Name (of Person	Area Code Daytin	ne Telephone Number
Enclosed 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		<u>Street Address:</u> Registration Se	etion
Registration Division of 0		Division of Co	
P.O. Box 632	•	The Centre of T	· -
Tallahassee.		2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

SECRETARY OF STATE BIVISION OF CORPORATIONS

(Name of the Limited L (A F	iability Company Iorida Limited Lia	as it now appears on ou bility Company)	r reco <u>rds.</u>)	
The Articles of Organization for this Limited Liabil Florida document number 210004953		rere filed on		and assigned
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liabili	ty company here:		
The new name must be distinguishable and contain the words	s "Limited Liability	Company," the designati	on "LLC" or the ab	previation "L.1.,C."
Enter new principal offices address, if applicable	e:	11906 LARI	C SONG L	-ουρ 1
(Principal office address MUST BE A STREET A	(DDRESS)	PINARVIOW.	FL, 33579	<u>1</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) B. If amending the registered agent and/or registered and/or the new registered office address ho	stered office ad	dress on our records	, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:	FERNAN	100 LAZCAN	10	
New Registered Office Address:	11906	LARK SONO Enter Florida stre	S LOOP_	
_	RIVER	Diew City		
New Registered Agent's Signature, if changing Regi			ta talonatono n	
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as register	and complete p	erformance of my du	iti <u>es,</u> and I am f	amiliar with and

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>	Name	Address	Type of Action
AMBR	FRANK Estevez		□Add
		11906 CARK SONGLOOP, Rive	Eview EvRemove
		FC, 33579	□Change
MGR	MGR FERNANDO LARCANO	11906 LARIC SONG LOOP	WAdd
		Riverview, FC, 33579	□Remove
			□Change
AMBR	MBR FERNANDO A LAZCANO	1)	🗆 Add
			□Remove
	11900 Rivece	11900 LARK SONG LOOP RIVERVIEW, FC, 33579	™ Change
			🗆 Add
			[]Remove
			□ Change
			🗆 🖊 🖺 🖺
			□Remove
			□Chunge
		🗆 Add	
		□Remove	

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff Note:	ive date, if other than the date of filing:
ne recor ord is fi	d 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 led.
Dated	03/1/2021
	Signature of a member or authorized representative of a member
	FRMK Estevez Typed or printed name of signee

Filing Fee: \$25.00