

121 000495 779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

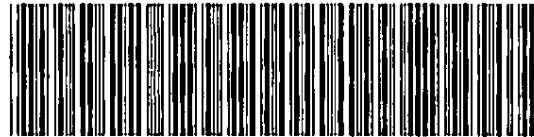
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Payment
receipt attached
03/02

Office Use Only



800378799568

800378799568
12/15/21--01002--009 *\$50.00

FILED

2022 MAR -2 PM 4:32

SECRETARY OF STATE
TALLAHASSEE, FL

cf 3/17/2022

COVER LETTER

RECEIVED

TO: Registration Section
Division of Corporations

2022 MAR -2 PM 3:13

SUBJECT: FULL SERVICE CONSULTING AND INVESTMENTS LLC

Name of Limited Liability Company

SECRETARY OF STATE
TALLAHASSEE, FL

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

Please return all correspondence concerning this matter to the followings:

Stanley Warren

Name of Person

FULL SERVICE CONSULTING AND INVESTMENTS LLC

Firm/Company

1107 Dorchester rd

Address

Palm Bay, FL 32908

City/State and Zip Code

thepropertydad@gmail.com

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

For further information concerning this matter, please call:

Stanley Warren

321

209-6513

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



RECEIVED

2022 MAR -2 PM 3:11

FLORIDA DEPARTMENT OF STATE
Division of Corporations
SECRETARY OF STATE
TALLAHASSEE, FL

January 29, 2022

FULL SERVICE CONSULTING & INVESTMENTS
1107 DORCHESTER RD
PALM BAY, FL 32907

12152101002009

Subject:
RE: 722A00002334

We have received your document for the above Fictitious Name and your check(s) totaling \$50.00; however, the document **has not been filed** and is being returned for the following:

PLEASE CALL 850-245-6051 TO DETERMINE WHAT YOU ARE TRYING TO FILE.

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

Should you have any questions regarding this matter you may contact our office at (850) 245-6058.

WILLIAM LAWRENCE
Reinstatement Section
Division of Corporations

Letter No. 722A00002334

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2022 MAR -2 PM 4: 32

FULL SERVICE CONSULTING AND INVESTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records
(A Florida Limited Liability Company))

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 11/18/21 and assigned
Florida document number L21000495779

This amendment is submitted to amend the following:

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

FULL SERVICE CONSULTING & INVESTMENTS 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

City

Florida

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or printed text 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

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00