

L21000515391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

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J. HORNE
OCT - 5 2022

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2022 OCT -4 PM 4:18

FILED

2022 OCT -4 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FL 32399

FILED

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from account: 120210000160 Amount: paid \$25.00

Authorization Signature

Dafirm Tax Services LLC

L21000515397

Business Name

Document #

Walk in

___ Pick up time ___

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___ Will wait

___ Photocopy

___ **Certified Copy (s) of Articles of Organization**

___ **Certificate of Status**

NEW FILINGS

___ Profit

___ Not for Profit

___ Limited Liability

___ Domestication

___ Other

___ **CORP**

___ LLLP

AMMENDMENTS

X Amendment

___ Resignation of R.A. Officer/Director

___ Change of Registered Agent

___ Revocation of Dissolution

___ Merger

___ **Conversion**

___ Articles of Conversion

___ Resignation

OTHER FILINGS

___ Annual Report

___ Fictitious Name

___ **ARTICLES OF CORRECTION**

___ APOSTIL () - _____

Country

___ Other

REGISTRATION/QUALIFICATIONS

___ Foreign filing

___ Limited Partnership

___ Reinstatement

EXAMINER'S INITIALS: _____

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EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dafirm Tax 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:

Ricardo Joseph
Name of Person

Dafirm Tax Services
Firm/Company

3350 SW 148th Ave Ste 110--
Address

Miramar, FL 33027
City/State and Zip Code

jsph rcrd98@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ricardo Joseph at (561) 647-1321
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Dafirm Tax Services LLC

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

FILED
2022 OCT -4 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 12/06/2021 and assigned
Florida document number L21000515397.

This amendment is submitted to amend the following:

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

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)

3350 SW 148th Ave Ste 110
Miramar, FL 33027

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Ricardo Joseph

New Registered Office Address:

3350 SW 148th Ave Ste 110

Enter Florida street address

Miramar

City

Florida

33027

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


[illegible]

N/A

(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.

Dated October 4, 2022


Signature of a member or authorized representative of a member

Ricardo Joseph
Typed or printed name of signee

Filing Fee: \$25.00