## K220000 25430

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SECRETARY OF STATE
TALLAHAS SEE, PATE

A. BUTLER FEB 2 2 2022

## **COVER LETTER**

elib lezer.	J. A. G. CLEA	NING SERVICE LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	KEMBERL	IS TORRES	
		Name of Person	<del></del>
		Firm/Company	
	615 COLONIAL DRIVE,	UNIT 16	
		Address	
	FORT WALTON BEACH	, FLORIDA 32547	
		City/State and Zip Code	
	ALEJANDROSOLEDAD5	•	
	F-mad uddress: (	to be used for future annual report nou	fication)
For further information (	concerning this matter, please c	all:	
KEMBERLIS TORRES	3	850 822-9176 at ()	
Name (	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for (	the following amount:		
€ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filling 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 FILED OF

2022 FEB 14 AM 10: 26

Zip Code

		SERVICE LLC		
(Name of the Limited (A	Liability Compa Florida Limited	i <mark>ny as it now appears (</mark> Liability Company)	in burlecords)) (、Y TALLAHAS	OF STATE SEE, FL
The Articles of Organization for this Limited Liab Florida document number L22000025430	oility Company	were filed on	/2022	and assigned
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of t	he limited liab	ility company here	<b>::</b>	
The new name must be distinguishable and contain the work	ds "Limited Liabi	lity Company," the desi	gnation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		615 COLONIAL DRIVE UNIT 16		
		FORT WALTON BEACH		
		FLORIDA 32547		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u>ON)</u>			
B. If amending the registered agent and/or reg agent and/or the new registered office address		address on our reco	ords, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:	KEMBERLIS '	TORRES	<del></del>	
New Registered Office Address:	615 COLONIA	L DRIVE UNIT 16		
		Enter Florida	i street address	
	FORT WALTO	N BEACH	, Florida <sup>3</sup>	2547

## 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.

City

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
MGR	TORRES, KIMBERLIS	615 COLONIAL DRIVE UNIT 16	□Add
		FORT WALTON BEACH	■Remove
		FLORIDA 32547	
MGR	TORRES, KEMBERLIS	615 COLONIAL DRIVE UNIT 16	<del>-</del>
	-	FORT WALTON BEACH	_
		FLORIDA 32547	
		□Remove	
			□Add
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ffective date, if other than the data an effective date is listed, the date must blote: If the date inserted in this block ocument's effective date on the Department.	c does not meet the app	dicable statutory filing requir	(optional) 90 days after filing.) Pursuant to 60 ements, this date will not be lis	5.0207 (3 sted as th
record specifies a delayed effective d Lis filed.	ate, but not an effectiv	e time, at 12:01 a.m. on the e	urlier of: (b) The 90th day afte	er the
poted	2022	$\sim$		
		<del>-</del>		
	May 1	athorized representative of a mer	nhu	
<u> </u>				

Typed or printed name of signee