L22000038685

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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SECULIARY OF STATE
SECULIARY OF STATE

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COVER LETTER

TO: Registration So Division of Co			•
	TALLS & REPAIRS, LLC		·
SUBJECT:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JOSE C CRUZ JR		
		Name of Person	
	MMA INSTALLS & REP.	AIRS, LLC	
		Firm/Company	
	2214 ELISE MARIE DRIV	√E	
		Address	
	SEFFNER,FL 33584		
		City/State and Zip Code	
	MMAINSTALLREPAIR@		~
		to be used for future annual report notif	ncation)
For further information (concerning this matter, please c	all:	
JOSE C CRUZ JR		813 409-1333 at ()	
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	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 Addre		Street Address:	otion.
Registration Division of 0		Registration Sec Division of Cor	
P.O. Box 633		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION! [] **OF**

2022 FEB 28 AM 6: 43

MMA INSTALLS & REPAIRS, LLC

S & REPAIRS, 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 v	vere filed on 01/19/2022	and assigned
Florida document number L22000038685		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	idress on our records, enter the na	me of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
rea registered office reducess.	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 agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and 1 an rovided for in Chapter 605, F.S. O	n familiar with and r, if this document is

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>	Address	Type of Action
MGR	MANUEL J CRUZ	2214 ELISE MARIE DRIVE	■Add
		SEFFNER. FL 33584	□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🖸 Add
			Remove
			[]Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Chanve

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	, , , , , , , , , , , , , , , , , , ,
(If an effect Note: If	e date, if other than the date of filing:
e record s ord is filed	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 d.
J./ Dated	ANUARY 19
	Mc L J A Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00