122000049113

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FILED
2022 HAR 29 PM 2: 40
ECKETATION OF STATE

A. BUTLER APR 1 3 2022 March 25, 2022

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N Monroe Street, Suite 810
Tallahassee, FL 32303

To whom it may concern,

I hired a company online to file my Florida company, Confidential Mobile Services, LLC. I was not married at the time of filing. However, I got married on March 12, 2022. After talking with Florida Department of Corporations I was informed that I need to send in an updated Amendment form for the Articles of Organization.

I, Lorena Wilson, recently married March 12, 2022; changing my name from Christianson to Wilson. In the process of getting everything set up, I also changed the business number from 541-214-8850 to 850-625-1920. My personal address and business address has not changed. Received my marriage license on 03/20/22 and took it with the SSA form to change my name. I received my name change letter from SSA on 03/21/2022. On 03/22/2022 I went to a local DMV office and changed my FLDL. On 03/25/2022 I sent in a letter to IRS to update my EIN.

I added the services that I am offering to the last page. Not sure if it is needed or not. In addition to the Notary Public services that I listed there (commissioned Florida Notary Public, Remote Online Notary, and that I am a Certified Notary Signing Agent through the National Notary Association), in the future I would like to add permit runner, mortgage field inspector, courier services, process server, and thumb printing. I am not sure if those all need to be added as I grow my business.

Hopefully I filed the form out correctly and completely. I look forward to hearing back from you soon.

Thank you,

Ľorena Wilson

Phone: 850-625-1920

Email: L.Wilson@ConfidentialMobileServices.com

Address: 691 S Silver Lake RD

Fountain FL 32438

COVER LETTER

Confidenti	al Mobile Services, 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:		
	Lorena Wilson			
		Name of Person		
	Confidential Mobile Service	ces, LLC		
Firm/Company				
691 S Siler Lake RD				
		Address		
	Fountian FL 32438			
City/State and Zip Code				
	L.Wilson@confidentialmob			
		to be used for future annual report notif	ication)	
For further information of	concerning this matter, please c	all:		
Lorena Wilson		850 6251920 at ()		
Name (of Person	Area Code Daytime	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		Street Address: Registration Sec		

Registration Section
Division of Corporations

P.O. Box 6327

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION FILED **OF**

2022 HAR 29 PM 2: 40

Confidential Mobile Services, LLC

(Name of the Limited Liability Company as it now appears on our records.) | OF STATE
(A Florida Limited Liability Company) | IALLAHASSEE, FI

The Articles of Organization for this Limited Liability Compar	by were filed on $\frac{01/27/2022}{}$	and assigned	
Florida document number 1.22000049113			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liz	ibility company here:		
The new name must be distinguishable and contain the words "Limited Lia	bility 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)			
	<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 agent and/or the new registered office address here: Name of New Registered Agent:	e address on our records, <u>e</u> i	nter the name of the new registered	
Name of New Registered Agent.	· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:	Enter Florida street a	ddrass	
	City	. Florida Zip Code	
New Registered Agent's Signature, if changing Registered Agen	•	,	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	— gree to act in this capacity. te performance of my dutie, s provided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, 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
AMBER	Lorena Christianson	691 S Silver Lake RD	
		Fountain Florida 32438	
			□Change
AMBER	Lorena Wilson	691 S Silver Lake RD	= Add
		Fountain Florida 32438	□Remove
			□Change
			Remove
			Change
			□Add
			□Remove
		 	Change
			□Add
		-	□Remove
			□Change
		-	□Add
			□Remove
			□Change

Certified Signing Agent thro	igh the National Notary Association.	
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	t be specific and cannot be prior to date of filing or more than 90 days a ock does not meet the applicable statutory filing requirements,	
ecord specifics a delayed effectivis filed.	e date, but not an effective time, at 12:01 a.m. on the earlier of	(b) The 90th day after the
March 25	2022	
Lorella.	··	
() () () () () () () ()	Signature of a member or authorized representative of a member	