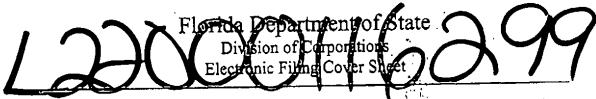
3/31/22, 4:09 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000118828 3)))



H220001189283ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALPHA BUSINESS CONSULTING, LLC

Account Number : 120080000061 Phone : (407)582-9830 : (407)601-6393 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LAGE GENERAL SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

T. LEMIEUX

Electronic Filing Menu

Corporate Filing Menu

Help APR - 1 2022

COVER LETTER

TO: Rep	gistration Sectivision of Corpo	ion Prations				
		RAL SERVICES, LLC				
SUBJECT:		Name of Limite	d Liability Company			
		mendment and fee(s) are submi				
		MARIA PINHEIRO		(Mga)		
		ALPHA BUSINESS CONS	Name of Person ULTING, LLC		•	of Status &
			Firm/Company	• • • •		•
		6412 W COLONIAL DR		· · · · · · · · · · · · · · · · · · ·	·	
			Address	•		
		ORLANDO, FL 32835		•		
			City/State and Zip Co		ation)	
For further	r information co	preerning this matter, please on				
MARIA P	INHEIRO		at (582-9830	Telephone Number	_
	Name of	f Person	Area Code	Layune	retephone (vomos)	
Enclosed	is a check for th	ne following amount:			7 240 00 000	
□ \$2 5.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Certified Cop (additional copy	у	Certified Co	of Status & opy
]]	Mailing Address Registration to Colorision of Colors 632	Section Corporations 27	Reg Div The	et Address: gistration Secvision of Corpe Contre of Ta	orations)
•	Tallahassee,	FL 32314		lahassee, FL		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAGE GENERAL SERVICES, LLC	
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) inbility Company)
The Articles of Organization for this Limited Liability Company Florida document number 122000116299 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability	
The new name must be distinguishable and contain the words "Limited Liabil	
The new name must be distinguishable and contain the words. Cirmied Elaboration	Ky Company, and congression
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 agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	D
New Registered Office Address:	Enter Florida street address St
	Clty Tap Code
New Registered Agent's Signature, If changing Registered Agent 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.	ree to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and provided for in Chapter 605, 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>	Name	Address	vpe of Action
AMBR	BIANCA O SILVA LAGE	1450 BELFIORE WAY	□Add
		WINDERMERE, FL 34786	Remove
			Change
			□Add
			□Remove
			_ Change
			_ 🗆 Add
			_ □Remove
			_ Change
			_ 🗆 Add
			_ Remove
			_ Change
			_ 🗆 Add
			_ □Remove
			Change
			□Add
			□Remove
		1411-ye (1)	Change

NONE			
			
			
			
			<u> </u>
			
		•	
			· -
			_
	- 440	(optional)	
Sective date, if other than the an effective date is listed, the date muter in the listed in this because it's effective date on the I ocument's effective date on the I	ist be specific and cannot be prior to date of block does not meet the applicable state	f filing or more than 90 days after filing.) Pursua tutory filing requirements, this date will no	at to 605.020 at be listed t
record specifies a delayed effecti l is filed.	ve date, but not an effective time, at 1	2:01 a.m. on the earlier of: (b) The 90th	day after th
MARCH 31	2022		
Oated MARCH 31			
	Signature of a method or/authorized re	presentative of a member	

Typed or printed name of signee