

L 22 000 147698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

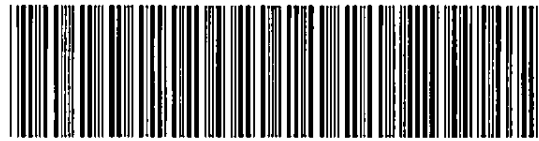
(Business Entity Name)

(Document Number)

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FILED
2025 JUN 26 PM 12:09
CLERK OF STATE
TALLAHASSEE, FL

8/14/2025

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AC NISI 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:

TURCIOS OSEGUERA, WALTER J

Name of Person

AC NISI SERVICES LLC

Firm/Company

4250 DIVISION ST

Address

HASTINGS, FL 32145

City/State and Zip Code

WALTERJOELTURCIOS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TURCIOS OSEGUERA, WALTER J

904 5254979
at () _____
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for 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 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

COVER LETTER

AC NISI SERVICES LLC
4250 DIVISION ST
HASTINGS, FL 32145
WALTERTURCIOS@GMAIL.COM
(904) 252-4979

JUNE 17, 2025

Registration Section – Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: AMENDMENT – COMPANY ADDRESS CHANGE

To Whom It May Concern,

I am submitting this letter along with the required documentation to notify the Division of Corporations of a change of address for **AC NISI SERVICES LLC** originally registered under document number **L22000147698**

Please find attached the amended form reflecting the updated company address. We kindly ask that this change be updated in your records accordingly.

If you need any further information or documentation to complete this amendment, please feel free to contact me at the phone number or email address listed above.

Thank you for your attention to this matter.

Sincerely,

WALTER J TURCIOS OSEGUERA

MGR

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

AC NISI SERVICES LLC

2025 JUN 26 PM 12:09

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

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 03/25/2022 and assigned
Florida document number L22000147698.

This amendment is submitted to amend the following:

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

N/A

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:

4250 DIVISION ST, HASTINGS, FL 32145

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

4250 DIVISION ST, HASTINGS, FL 32145

(Mailing address MAY BE A POST OFFICE BOX)

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: N/A

New Registered Office Address: 4250 DIVISION ST

Enter Florida street address

HASTINGS, Florida 32145

City

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

to update the following information:

Principal Office Address : 4250 DIVISION ST, HASTINGS, FL 32145

Mailing Address: 4250 DIVISION ST, HASTINGS, FL 32145

Registered Agent Address: 4250 DIVISION ST, HASTINGS, FL 32145

Manager Address: 4250 DIVISION ST, HASTINGS, FL 32145

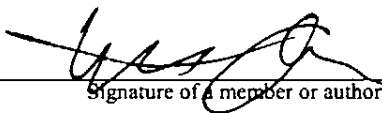
E. Effective date, if other than the date of filing: 06/17/2025 **(optional)**

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 JUNE 17, 2025



Signature of a member or authorized representative of a member

TURCIOS OSEGUERA, WALTER J

Typed or printed name of signee

Filing Fee: \$25.00