6/16/22, 2:49 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.

(((H22000209994 3)))



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 : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

**Enter	the	email	address	for	this	business	entity	to	be	used	for	future
						only one						

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OLD FASHION QUALITY SERVICE LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OLD FASHION QUALITY SERV	VICE LLC	
(Name of the Lim	ited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited I	Liability Company were filed on 04/21/2022	and assigned
Florida document number L22000191489		
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company here:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the designation	1 "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	<u> </u>
TO A		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u> </u>	
B. If amending the registered agent and/or agent and/or the new registered office address.		4D
		2022 L
Name of New Registered Agent:	RHONAL J. DE GANNES	
New Registered Office Address:	27257 SW 121ST CT	£1 6 ₹
	Enter Florida street	address
	HOMESTEAD	_, Florida 33032
	City	Zi Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	7, 7

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 um 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

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

To:

<u>Title</u>	Name	Address	Type of Action
AMBR	RHONAL J. DE GANNES	27257 SW 121ST CT	⊌bbA
		HOMESTEAD, FL 33032	⊟Rетюv е
			□Change
MGR	MICHELLE ACEVEDO	27257 SW 121ST CT	≅Add
		HOMESTEAD, FL 33032	□Remove
			□Remove
			□Add
			□Remove
			☐ Change
			□ Псеточе
			□Change
			□Add
			□Change

Page: 5 of 5

<u> </u>					
<u> </u>	·				
				···-	
		<u> </u>			
,				_	
					
***************************************		· · · · · · · · · · · · · · · · · · ·	·		
	<u></u>	<u> </u>			
					
	 				
					-
					
with the second				_ .	
Effective date, if other than fan effective date is listed, the date Note: If the date inserted in the document's effective date on the	must be specific and on block does not me	cannot be prior to do cet the applicable	te of filing or more that statutory filing requi	(optional) 190 days after filing.) Purements, this date wil	rsuant to 605.0207 I not be listed as
e record specifies a delayed effe rd is filed.	etive date, but not a	an effective time,	at 12:01 a.m. on the	earlier of: (b) The 9	Oth day after the
Dated 06/16		2022			
	1				
11.1 602-676					
Q P	Signature of a m	ember or authorize	d representative of a m	ember	