# L22000206867

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SECKE FARY TALL AHASSEF, FLORIDA



## COVER LETTER

TO: Registration Section Division of Corporations	1 <sub>e</sub> ,
SUBJECT: Excels or Services W A & C. UC  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:	
lanis Blanquicett Name of Person	
Firm/Company	
7901 4th St. N, Ste 300	
St. Polers Bug Fl 33702  City/State and Zip Code  Londrato - COEgna? L. Con  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Leanis Blangu? CeH at (754) 2322493 Name of Person at (754) Daytime Telephone Number	<del></del> -
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee	f Status & py

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



November 13, 2023

LEANIS BLANQUICETT 7901 4TH ST N STE 300 ST, PETERSBURG, FL 33702

SUBJECT: EXCELSIOR SERVICES BY A & C. LLC

Ref. Number: L22000206867

We have received your document for EXCELSIOR SERVICES BY A & C. LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 823A00026209

Valerie Herring Regulatory Specialist III Internet Support

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(A Flori	ida Limited Liability Company)
The Articles of Organization for this Limited Liability	Company were filed on May 2011 7077 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	mited liability company here:
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "1.1.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADI	7901 4th St N, St 300 DRESS) St Blevsburg FL, 33702
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or register	red office address on our records, enter the name of the new ree_ered
agent and/or the new registered office address here	
Name of New Registered Agent:	Logislered Agents Inc
New Registered Office Address:	901 4th 51 N. 5te 300  Enter Florida street address
	St. Polershord, Florida 33702 Zip Code
New Registered Agent's Signature, if changing Registe	ered 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

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 Type of Action Title Address Name MGR Jonnis Blangwill 3901 4th St N, St 300 MAGE) St Pokersburg Fl, 33702 | Remove Change MGR CIAthia Pathono 201 SW 7th St AP 7 DAdd Boca Raton Florida 33/32 (Remove) \_\_\_\_\_ □Change □Add \_\_\_\_ □Remove \_\_\_\_\_\_ □Change \_\_\_\_\_ 🗆 Add □Remove □Remove \_\_\_\_\_\_ □ Change □Remove ☐Change

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