

122000225705

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

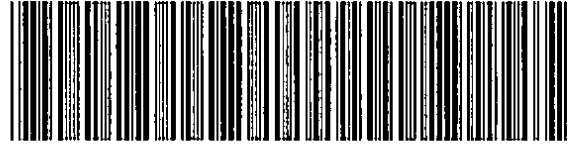
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DIVISION OF REVENUE
TAXPAYER SERVICE CENTER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOVEWORKS STAFFING 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:

Alberto Cruz

Name of Person

LoveWorks Holding, LLC

Firm/Company

5332 Hawford Circle

Address

Orlando, FL 32812

City/State and Zip Code

cruz@loverafl.com

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

For further information concerning this matter, please call:

Alberto Cruz

407

970-1351

at ()

Name of Person

Area Code

Daytime Telephone Number

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

22 SEP 14 AM 9:57

Division of Corporations
Tallahassee, FL

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

LOVEWORKS STAFFING LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/13/2022 and assigned Florida document number L22000225705.

This amendment is submitted to amend the following:

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 "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5332 Hawford Circle

Orlando, FL 32812

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5332 Hawford Circle

Orlando, FL 32812

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: LOVEWORKS HOLDING LLC

New Registered Office Address: 5332 Hawford Circle
Enter Florida street address

Orlando, Florida 32812
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 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

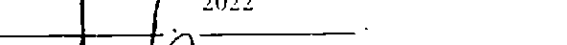
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	LOVEWORKS HOLDINGS LLC	5332 Hartford Circle	<input type="checkbox"/> Add
		Orlando, FL 32812	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Crystal Ceja	5332 Hawford Circle	<input checked="" type="checkbox"/> Add
		Orlando, FL 32812	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Alberto Cruz	5332 Hawford Circle	<input checked="" type="checkbox"/> Add
		Orlando, FL 32812	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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2025 RELEASE UNDER E.O. 14176
DIVISION OF CLERICAL WORK
22 SEP 14 AM 9:57

22 SEP 14 AM 9:57

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.

Dated September 13th 2022



Signature of a member or authorized representative of a member

Alberto Cruz, President of LoveWork Holding, LLC

Typed or printed name of signee



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Limited Liability Company
LOVEWORKS STAFFING LLC

Filing Information

Document Number L22000225705
FEI/EIN Number NONE
Date Filed 05/13/2022
Effective Date 05/13/2022
State FL
Status ACTIVE

Principal Address

5332 HARTFORD CIRCLE
ORLANDO, FL 32812

Mailing Address

5332 HARTFORD CIRCLE
ORLANDO, FL 32812

Registered Agent Name & Address

LOVEWORKS HOLDING LLC
5332 HARTFORD CIRCLE
ORLANDO, FL 32812

Authorized Person(s) Detail

Name & Address

Title AMBR

LOVEWORKS HOLDINGS LLC
5332 HARTFORD CIRCLE
ORLANDO, FL 32812

Annual Reports

No Annual Reports Filed

Document Images

05/13/2022 -- Florida Limited Liability

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