

H220003237103

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L220003237103

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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : EXPERTAX
 Account Number : I20200000610
 Phone : (407)777-7470
 Fax Number : (321)206-9743

****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
 LOS ANGELES MULTISERVICES LLC**

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C. BRUMBLEY
 SEP 23 2022

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SECRETARY OF STATE
 TALLAHASSEE, FL

2022 SEP 21 AM 10:21

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOS ANGELES MULTISERVICES 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:

ILSIAS GELVEZ FONSECA

Name of Person

Firm/Company

2800 OSPREY COVE APT 204

Address

KISSIMMEE, FL 34746

City/State and Zip Code

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

For further information concerning this matter, please call:

ILSIAS GELVEZ FONSECA

407 952-6397

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

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

LOS ANGELES MULTISERVICES 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 06/02/2022 and assigned
 Florida document number L22000238803.

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)

2800 OSPREY COVE APT 204

KISSIMMEE, FL 34746

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2800 OSPREY COVE APT 204

KISSIMMEE, FL 34746

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:

New Registered Office Address:

2800 OSPREY COVE APT 204

Enter Florida street address

KISSIMMEE

Florida

34746

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

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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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MBR	YURAIMA F.GARCIA MAESTRI	2890 OSPREY COVE APT 204	<input checked="" type="checkbox"/> Add
		KISSIMMEE, FL 34746	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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