## L22 000 388271

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	<u> </u>
(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busir	ness Entity Nar	ne)
(Docu	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fil	ing Officer:	

Office Use Only
A. RIVERS

JAN 1 8 2023



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December 15, 2022

TIMOTHY TAYLOR 2522 CHESTNUT SPRINGS LN. JACKSONVILLE, FL 32246

SUBJECT: ADDED VALUE SOLUTIONS LLC

Ref. Number: L22000388271

We have received your document for ADDED VALUE SOLUTIONS 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 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.

Alecia Rivers Regulatory Specialist II

Letter Number: 922A00027918

## COVER LETTER

	Registration S Division of Co				
SUBJEC		ue Solutions			
SOBJEC		Name of Lim	ited Liability Company	·	
		Amendment and fee(s) are sub			
		timothy taylor			
		<del></del>	Name of Person		
Added Value Solutions LLC					
	Firm/Company				
	2522 Chestnut Springs Ln				
			Address	······································	
		jacksonville fl 32246			
			City/State and Zip Code		ح
		tnttim@mac.com  E-mail address: (	to be used for future annual report noti	fication)	2 2
For furthe	er information o	concerning this matter, please co			H. T.
timothy t	aylor		904 718-1338 at ( )		
	Name o	of Person		e Telephone Number	2023 JAH 18 171 18 13
Enclosed	is a check for the	he following amount:			
		☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Added Value Solutions

( <u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company w		_ and assigned
Florida document number L22000388271		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	tv company here:	
Value Added Solutions LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		<del> </del>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
and the second s	describe an annual control the name	of the new registered
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	dress on our records, enter the name of	of the new registered
Name of New Registered Agent:		20
	2	٣٠. ك
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Zip Code:
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and I am far ovided for in Chapter 605, F.S. Or, if	niliar with and this document is

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>	Address	Type of Action
			□ Add
			□Remove
			Change
			□Add
			□ Remove
			□Add
			□Remove
			☐Change
			□Add
			□ Remove
			□Add
			□Remove
			Change
			□Add
			Remove
			□Change

Note: If the date inserted in this block does not meet the applicable statutory fiting requirements, this date will not be listed as document's effective date on the Department of State's records.  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 red is filed.						
Effective date, if other than the date of filing:  [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  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  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 distilled.  Dated September 19, 2022					-	
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Signature of a member or authorized representative of a member	Dated September 19,		2022			
Signature of a member of authorized representative of a member				7 Contractive of a	member	
		Signature of a fr	ichiner of aumoriz	ed representative of a	anethr/cr	
Timothy Taylor			Typed or printed i			

Filing Fee: \$25.00