

L22000 AS<sup>4</sup> 729

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

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\_\_\_\_\_  
(Business Entity Name)

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CLERK OF COURT  
JANUARY 13, 2004

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SERVICE PROFESSIONAL CM 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:

FRANCISCO A. CORREA MORALES  
Name of Person

SERVICE PROFESSIONAL CM LLC  
Firm/Company

5607 NW 206th terrace  
Address

Miami Gardens, FL 33055  
City/State and Zip Code

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

For further information concerning this matter, please call:

FRANCISCO A. CORREA at (646) 932-5637  
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

Service professional CM LLC

**If Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

Title	Name	Address	Type of Action
AMBR	SONIA A, AMPUERO	5607 NW 206th Terr	<input type="checkbox"/> Add
		Miami Gardens FL, 33055	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

PLA

2028 FEB 22 PM 3:00  
 2028 FEB 22 PM 3:00  
 2028 FEB 22 PM 3:00

**E. 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 (3)(b)

**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.

If 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 record is filed.

Dated February 13, 2023

Francisco Correa II

Signature of a member or authorized representative of a member

FRANCISCO A. CORREA MORALES

Typed or printed name of signee

**Filing Fee: \$25.00**