

L23 000019320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

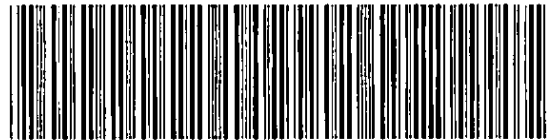
(Document Number)

Additional Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400403628534

2023 MAR - 1 AM 11:27
03/01/23--01002--022 *25.00

RECEIVED
2023 MAR - 1 AM 11:07
DIRECTOR OF REVENUE
FLORIDA

RECEIVED
MAR - 1 2023

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: Daniel's Construction and Repair Services 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:

Sindi Paola Hernandez Trujillo

Name of Person

Daniel's Construction and Repair Services

Firm/Company

2138 Old Tampa Hwy

Address

Lakeland, FL 33815

City/State and Zip Code

hernandezcindy1112@icloud.com

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

For further information concerning this matter, please call:

Sindi Paola Hernandez Trujillo

863

269-5326

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

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

Daniel's Construction and Repair Services LLC

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

2023 MAR -1 AM 11:27

The Articles of Organization for this Limited Liability Company were filed on January 9, 2023 and assigned
Florida document number L23000019320.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Sindi Paola Hernandez Trujillo

New Registered Office Address:

2138 Old Tampa Hwy

Enter Florida street address

Lakeland

City

Florida 33815

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.

Sindi H.

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Sindi Paola Hernandez Trujillo	2138 Old Tampa Hwy	<input checked="" type="checkbox"/> Add
		Lakeland, Fl 33815	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Cindy Paola Hernandez Trujillo	2138 Old Tampa Hwy	<input type="checkbox"/> Add
		Lakeland, Fl 33815	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

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.

Typed or printed name of signee

Filing Fee: \$25.00