# L230000 31109

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone i	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
	51	5-8.23

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### **COVER LETTER**

	Registration Se Division of Cor			
SUBJEC		TISERVICES LLC		
SUBJEC		Name of Lin	nited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		HEREDIA BATISTA, YU	JLEIMIS	
			Name of Person	
			Firm/Company	
		3126 NW 56TH STAPT 2		
		MIAMI FL 33142	Address	
			City/State and Zip Code	
		E-mail address: (	to be used for future annual report notif	lication)
For furthe	er information co	oncerning this matter, please c	all:	
YULEIM	IIS HEREDIA E	BATISTA	305 889-4902	
	Name of	Person		: Telephone Number
Enclosed	is a check for th	e following amount:		
■ \$25.0	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)
I I	Mailing Addres Registration S Division of C	Section orporations	<u>Street Address:</u> Registration Sec Division of Corp	porations
	P.O. Box 632 Fallahassee, F		The Centre of T 2415 N. Monroe	allahassee Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



23 MAR 10 AM 8: X0

#### Y R V MUTISERVICES LLC

company has been notified in writing of this change.

(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 01/17/2	2023 and assigned
Florida document number L23000031109		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Y R V MULTISERVICES LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the design	nation "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 a agent and/or the new registered office address here:	ddress on our recor	ds, enter the name of the new registered
Name of New Registered Agent:		
		•
New Registered Office Address:	Enter Florida s	treet address
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	·
	na to act in this can	with I further away to comply with the
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as period to merely reflect a change in the registered office	performance of my provided for in Chap	duties, and I am familiar with and oter 605, F.S. Or, if this document is

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

Title	<u>Name</u>	Address	Type of Action
			□Add
		<del></del>	□Remove
			□ Change
		<del></del>	□Add
		<del> </del>	□Remove
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		V-2-100	□Add
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## Page 2 of 3

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lf an eff Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	MACH 03 . 2023
	$\sim \nu$
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00