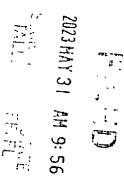
## 173000066947

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## **COVER LETTER**

	Registration S Division of Co			•
OUD INC		SERVICES LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		ADELFO ROQUE		
			Name of Person	· <del></del>
		CAPITAL ACCOUNTS, I	NC.	
			Firm/Company	<del></del>
		1500 NW 89TH CT STE	21	
		· · · · · · · · · · · · · · · · · · ·	Address	
		DORAL, FL 33172		
			City/State and Zip Code	
		aroque@capitalaccounts.ne		
		E-mail address: (	to be used for future annual report n	otification)
For furth	er information (	concerning this matter, please c	all:	
ADELF	O ROQUE		305 482-9616 at ( )	
	Name	of Person	Area Code Days	ime Telephone Number
Enclosed	l is a check for t	he following amount:		
<b>■ \$2</b> 5.	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 Addre Registration		Street Address: Registration S	
Division of Corporations		Division of C	orporations	
	P.O. Box 63: Tallahassee,		The Centre of 2415 N. Mon	Tallahassee roe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 HAY 31 AM 9: 56

NV SOD SERVICES LLC

company has been notified in writing of this change.

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

The Articles of Organization for this Limited Liability Company Florida document number L23000066947	were filed on February 6, 2023 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1798 FOX GRAPE LOOP	
(Principal office address MUST BE A STREET ADDRESS)	LUTZ. FL 33558	
Enter new mailing address, if applicable:	1798 FOX GRAPE LOOP	
(Mailing address MAY BE A POST OFFICE BOX)	LUTZ, FL 33558	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, enter the name of the new registered	
The Mining Control of the Control of	Enter Florida street address	
	, Florida	
N. D. L. C. C. C. C. C. Designation Designation of America	City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete accept the obligations of my position as registered agent as provided agent ag	performance of my duties, and I am familiar with and	
being filed to merely reflect a change in the registered office	address, I hereby confirm that the limited liability	

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>	Type of Action
AMBR	YENNIFER SANCHEZ	1798 FOX GRAPE LOOP	□Add
		LUTZ, FL 33558	□Remove
			<b>⊞</b> Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
		_	DAdd
			□Remove
			□Change
			□Add
			□Remove
			Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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	(optional)
	ve date, if other than the date of filing:
	on the sarlier of (h). The 90th day after the
record	I 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 ed.
	2023
ated	May 24 , 2023
	Signature of a member or authorized representative of a member
	YENNIFER SANCHEZ
	Typed or printed name of signee

Filing Fee: \$25.00