6/6/23, 9:43 AM Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMITER & SINGER, LLP

Account Number : 120000000085 Phone : (561)626-4742 Fax Number : (561)626-4742

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

		g		ARTICLES	OF OR	GANIZA'	ΓΙΟΝ	
€	P	•		*	OF	•	9	
		ACA Servi	cer, LT.C					
		_	Name of th	e Limited Liability (A Florida	Company a	s (t now appear	on our records.)	
The A	Article: la doct	s of Organizat unent number	ion for this Lim L23000197878	ited Liability Co	mpany wer	c filed on Ap	ril 20, 2023	and assigned
This a	ımendı	ment is submi	tted to amend th	e following:				
A. If	amen	ding name, <u>e</u>	ter the new na	me of the limite	d liability	сотрапу be	<u>re</u> ;	
he nes	v name	must be disting	المار					

Enter new principal offices address, if applicable:	9858 Clint Moore Rd, C111-122
(Principal office address MUST BE A STREET ADDRESS)	Boca Ratun, FL 33496
Enter new mailing address, if applicable:	9858 Clint Moore Rd, C111-122
•	

and/or the new registered office addr	registered office address on our records, <u>enter the ress here:</u>		2023	
Name of New Registered Agent:		• •	/ <u>-</u>	
New Registered Office Address:			-6	-
	Enter Florida street address		; <u>P</u>	C
	, Florida		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.

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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
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Effectiv If an effec Note: If documer	e date, if other than the date of filing: ive date is listed, the date must be specific and cunnot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
	pecifics a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
e record : rd is filed	
	2023 Al Al

Filing Fee: \$25.00