L23000269255

(Keq	uestor's Name)	
(Addı	ress)	
(Addı	ress)	
(City/	'State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nam	e)
(Doce	ument Number)	_
Certified Copies	Certificates	of Status
Special Instructions to Fi	-	
	J. HORN DEC 27	VE
	J. ''	2023
	DEC 1	

Office Use Only



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12/11/28--01087--024 **25.00





IMPORTANT NOTICE



PLEASE SEND ALL DOCUMENTS – APPROVED OR REJECTED TO THE ADDRESS BELOW.

INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

Inc Authority : Florida

TO: PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING: Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Taliahassec, FL 32314

FROM: Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE: Thursday, November 30, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For: TOMEEKS SERVICES, LLC

We have included payment in the amount of \$25.00 for the following fees:

• Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

COVER LETTER

TO:				
SUBJI	ECT: TOMEEK	(S SERVICES, LLC		
SUBJECT: TOMEEKS SERVICES LLC Name of Limited Liability Company The enclosed Articles of Amendment and feets) are submitted for filting. Please return all correspondence concerning this matter to the following: Corporate Maintenance Lead Name of Person Processing Department Firm Company 1450 Vassar St Address Reno, NV 89502 City-State and Zip Code E-mail address: too be used for future annual report notification) For further information concerning this matter, please call: Processing Department Name of Person Area Code Daytine Telephone Number Enclosed is a check for the following amount: S25,00 Filling Fee Certificate of Status Certified Copy tadditional copy is enclosed: MAILING ADDRESS: Registration Section Division of Corporations STREET/COURIER ADDRESS: Registration Section Division of Corporations				
The en	closed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		•		
		Corpor		ead
			Name of Coon	
		Processing Department Firm/Company 1450 Vassar St Address Reno, NV 89502 City/State and Zip Code		
			Firm/Company	
		1	450 Vassar St	
			Address	
			Reno, NV 89502	
		E-mail address: (to be used for future annual report not	afication)
For fu	rther information co			
		-	at (800) 638-2320)
	Name o	i Person	Mea Code Dayin	ne Terephone (Namber
Enclos	sed is a check for th	ne following amount:		
		□ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
	Registr Divisio	ration Section on of Corporations	Registration Sect	HER ADDRESS:
		assee, FL 32314	2661 Executive C	enter Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLE	S OF ORGANIZATION	22.
	OF	43 T. J. C.
		23 13/11/20 11:20
	·	• •
(<u>Name of the Limited Liabi</u> (A Flora	lity Company as it now appears on our reco la Limited Liability Company)	r <u>ds.</u>)
		, '
The Articles of Organization for this Limited Liability	Company were filed on 06/02/23	and assigned
lorida document number L23000269255		
 		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
,		
TOM/N The new name must be distinguishable and contain the words "Li	MAX SERVICES, LLC mined Lightliny Company "the designation "L	C" or the abbreviation "L.L.C."
the new faithe than or drawing distance and contain the words. 1.1	mined Entermy Company. The designation 121	to the device that on the second
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
••		· <u>.</u> .
Mailing address MAY BE A POST OFFICE BOX)		·
		·*************************************
B. If amending the registered agent and/or reg		ula matau tha nama af tha
egistered agent and/or the new registered office ad		us, cater the name of the
		
Marrie of Marri Davistanad Assault		
Name of New Registered Agent:		
New Registered Office Address:		_
	Enter Florida street add	ress
		Florida
	City	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.

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>	Address	Type of Action
MGR	Arick Meeks	19113 Nfs 573	
		Altoona, FL 32702	Remove
			Change
<u>MGR</u>	Max Powell	_19113 Nfs 573	
		Altoona, FL 32702	Remove
			☐ Change
			Add
			Remove
			Change
			Add
		-	Remove
			□ Change
	-		Add
			Remove
		-	Change
			Add
			Remove
			☐ Change

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-		
	· · · · · · · · · · · · · · · · · · ·	
 -		
n effective ote: If th	date, if other than the date of filing: N/A (optional) 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 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listereffective date on the Department of State's records.	.020 ad a
	specifies a delayed effective date, but not an effective time, at $12\!:\!01$ a.m. on the earlied day after the record is filed.	er
ted	November 29 2023	
	November 29 2023 [Mana] S. Britt II	
	Signature of a member or authorized representative of a member	
-	Thomas Britt	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

COVER LETTER

.

Registration Section

TO:

Division of Corpo	rations		
SUBJECT: TOMEEKS	SERVICES II C		
SUBJECT: TOWLERS	T: TOMEEKS SERVICES_LLC Name of Limited Liability Company Seed Articles of Amendment and feets) are submitted for filing. Seed Articles of Amendment and feets) are submitted for filing. Seed Articles of Amendment and feets) are submitted for filing. Seed Articles of Amendment and feets) are submitted for filing. Corporate Maintenance Lead Name of Person		
The enclosed Articles of An	nendment and feets) are sub-	mitted for filing.	
Please return all correspond	ence concerning this matter t	o the following:	
	Corpora	ate Maintenance Le	ad
			
	Proc	essing Department	
		Firm Company	
	1	450 Vassar St	
		Address	
		Reno, NV 89502	
	-	City State and Zip Code	
	L-mail address: (t	to be used for future annual report noti	fication)
For further information con	cerning this matter, please co	ıllı:	
Processin	ng Department	800 . 638-2320	
		Area Code Daytim	e Telephone Number
Englosed is a check for the	following amount:		
S25.00 Filing Fee	□ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
Registrat Division P.O. Box	ion Section of Corporations	STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OF	231
		23 (5) // 11:30
	KS SERVICES, LLC	1
(Name of the Limited Liability (A Florida	Company as it now appears on c Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Co	ompany were filed on <u>06/02</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
TOM/MA	X SERVICES, LLC	01170 - 4 - 11 - 11 - 01 1 7 °
The new name must be distinguishable and contain the words "Limi	ted Liability Company. The design	ation "LLC" or the appreviation (L.E.C.)
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	.	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		r records, <u>enter the name of the n</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	treet address
	Dance Fronting S	
	· Cine	Florida

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.

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
MGR_	Arick Meeks	19113 Nfs 573	
		Altoona, FL 32702	
			Change
MGR_	Max Powell	19113 Nfs 573	
		Altoona, FL 32702	□ Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
		·	☐ Remove
			☐ Change
			Remove
			☐ Change
			Remove
			□ Change

	-				
			<u> </u>		
			_		 -
an effective c lote: If the		specific and cannot be prior to does not meet the applical			
	specifies a delayed e day after the record	ffective date, but not d is filed.	an effective time,	at 12:01 a.m. on the	earlier o
ated	November 29	2023 [[Mova]]			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00