

L23000269936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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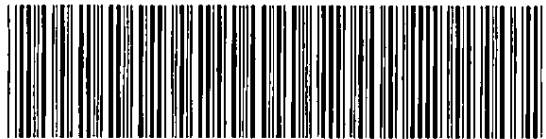
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

164

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J RAMOS GENERAL SERVICE LLC

Name of Limited Liability Company

Enclosed Articles of Amendment and fees are submitted for filing.

Please direct all correspondence concerning this matter to the following:

JUAN F RAMOS

Name of Person

J RAMOS GENERAL SERVICE LLC

Firm Company

113 WEST 13 ST

Address

HALEAH FL 33010

City State and Zip Code

RAMOSJUANFERNANDO9@gmail.com

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

For further information concerning this matter, please call:

Juan F Ramos at (786) 461 0365
Name of Person Area Code Daytime Telephone Number

check for the following amount:

- | | | | |
|-------------------------------------|---|--|--|
| ☐ 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**

RAMOS GENERAL SERVICE LLC

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

Articles of Organization for this Limited Liability Company were filed on 06/05/2023 and assigned
File Number 123000269936

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

RAMOS GENERAL SERVICE LLC

Names 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:

113 W 13 ST, HIALEAH FL 33010

(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: RAMOS, JUAN F. SR

New Registered Office Address: 113 WEST 13 ST

Enter Florida street address

HIALEAH, Florida 33010

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

To 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>
MGR	JUAN RAMOS	113 WEST 13 ST, HIALEAL FL 33010	☐ Add
			☐ Remove
			☒ Change
AMBR	JUAN RAMOS	113 WEST 13 ST, HIALEAL FL 33010	☐ Add
			☐ Remove
			☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If intending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(If the document 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 date of filing.)

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Signature of a member or authorized representative of a member

JUAN F RAMOS

Typed or printed name of signee

Filing Fee: \$25.00