## L23000372749

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## **COVER LETTER**

	Registration Sec Division of Corp					
	AR'S SOLU					
SUBJEC'	T:	Name of Limited Liability Company				
The enclo	sed Articles of a	Amendment and fee(s) are sub-	nitted for filing.			
Please ret	urn all correspo	ndence concerning this matter	to the following:			
		Antonio Rosado				
			Name of Person			
	AR'S SOLUTIONS AND SALES LLC				2023 SEX	
			Firm/Company	<del></del>	HO.	1 6 2 6 8 12 1 2 1
	1312 W CLINTON ST.				8-1	ra.c.
	Address				유 왕의 구 보	ال <del>استان</del> و و ا
		TAMPA, FL 33604			2023 NOV -8 PM 2: 24 SECULIARY OF STATE	
		arssolutionsands	City/State and Zip Code Sales Ic@gmail.com to be used for future annual report notif	) ication)	mi #	
For furthe	er information c	oncerning this matter, please ca	ail:			
Antonio !	Rosado		at ()	******		
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed	is a check for th	ne following amount:				
□ \$25.0	00 Filing Fee	\$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AR'S SOLUTIONS AND SALES		
(Name of the Limi	ted Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited L		/08/2023 and assigned
lorida document number L23000372749	<del></del> '	
This amendment is submitted to amend the following	lowing:	
A. If amending name, enter the new name of	of the limited liability company he	<u>re</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the d	esignation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	
Principal office address MUST BE A STREE	ET ADDRESS)	
		2073
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	BOX)	87 - M
	<u></u>	In the state of th
		~ ~ ~
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office address on our r ess here:	ecords, enter the name of the new registo
Name of New Registered Agent:	Ana E Rosado	
New Registered Office Address:	1312 W Clinton St	
Trom traditional action transmit	Enter Flo	rida street address
	Tampa	, Florida 33604
	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 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
AP	Antonio O. Rosado	1312W. Vinton St. Tangaft	_ 🗹 Add
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