

L23 000430 069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

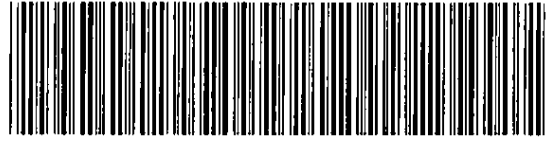
(Business Entity Name)

(Document Number)

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2023 OCT 17 AM 11:42  
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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** M & M SERVICES.COM.LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MIGUEL F. BEJARANO  
Name of Person  
OWNER/ M & M SERVICES.COM.LLC  
Firm/Company  
6288 RIVERWALK LN UNIT 4  
Address  
JUPITER FLORIDA 33458  
City/State and Zip Code  
miferbe1250@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MIGUEL F. BEJARANO at ( 561 ) 339 3201  
Name of Person Area Code Daytime Telephone Number

2009 OCT 17 PM 11:42  
SECRETARY OF STATE  
FLORIDA

Enclosed is a check for the following amount:

- \$25.00 Filing Fee *ch# 1410*
- \$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

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

M & M SERVICES.COM,LLC

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

The Articles of Organization for this Limited Liability Company were filed on 09/14/2023 and assigned Florida document number L23000430069.

This amendment is submitted to amend the following:

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

The new name 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:

(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: MIGUEL F. BEJARANO

New Registered Office Address: 6288 RIVERWALK LN UNIT 4  
*Enter Florida street address*

JUPITER, Florida 33458  
*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>	<u>Address</u>	<u>Type of Action</u>
MGR	MIGUEL F. BEJARANO	6288 RIVERWALK LN UNIT 4	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
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2023 OCT 17  
 SECRETARY  
 TALLAHASSEE

