(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer.	
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### COVER LETTER 24-0257 - DBPRQ - ZOGHBI

Tallahassee, FL 32303

porations				
S MAINTENANCE SERVIC	'ES LLC			
Name of Lim	ited Liability Company			
Amendment and fee(s) are sub	mitted for filing.			
ndence concerning this matter	to the following:			
ADRIAN MIDDLETON.	ESQ			
	Name of Person			
SWORD & SHIELD LLC				
	Firm/Company			
1437 MARKET ST				
	Address			
TALLAHASSEE, FL 323	12			
DITE CAMADINA MINERIES	City/State and Zip Code	<del></del>		
		ification)		
, ESQ	850 815 0256			
Person	Area Code Daytin	ne Telephone Number		
e following amount:				
☐ \$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)		
<u>s:</u> Section	<u>Street Address:</u> Registration Se	ection		
orporations	Division of Co	Division of Corporations		
		Fallahassee oc Street, Suite 810		
	S MAINTENANCE SERVIC  Name of Lim  Amendment and fee(s) are sub indence concerning this matter  ADRIAN MIDDLETON.  SWORD & SHIELD LLC  1437 MARKET ST  TALLAHASSEE, FL 323  BIZ@ SWORDANDSHIEL  E-mail address: ( oncerning this matter, please c. , ESQ  Person  e following amount:  \$\Begin{align*} \Begin{align*} \Begin{align*} \Begin{align*} Certificate of Status  \Begin{align*} \Be	Amendment and fee(s) are submitted for filing.  Amendment and fee(s) are submitted for filing.  Indence concerning this matter to the following:  ADRIAN MIDDLETON, ESQ    Name of Person		

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TO: Registration Section

# **COVER LETTER**

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Registration Section

TO:

Division of Co	rporations				
FOOTHIL	LS MAINTENANCE SERVIC	'ES LLC			
SUBJECT:	Name of Lin	nited Liability Company	<del></del>		
The enclosed Articles of	Amendment and fee(s) are sub-	unitted for filing			
		_			
Please return all correspo	ondence concerning this matter	to the following:			
	ADRIAN MIDDLETON.	ESQ			
		Name of Person			
	SWORD & SHIELD LLC				
		Firm/Company			
	1437 MARKET ST				
		Address			
	TALLAHASSEE, FL 323	12			
		City/State and Zip Code			
	BIZ@SWORDANDSHIEI				
	E-mail address: (	to be used for future annual report no	tification)		
For further information of	concerning this matter, please c	all:			
ADRIAN MIDDLETON	N, ESQ	850 815 0256			
Name o	of Person	at () Area Code Daytii	ne Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 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		Street Address:	antian		
Registration ! Division of C		_	Registration Section Division of Corporations		
P.O. Box 632	•	The Centre of			
Tallahassee, 1	FL 32314	2415 N. Monro	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOOTHILLS MAINTENANCE SERVICES 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 \_\_\_\_\_\_ and assigned Florida document number 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 "LLC." 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: New Registered Office Address: Enter Florida street address

#### 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.

City

\_. Florida \_

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ZOGHBI, SAM A	100 S ASHLEY DRIVE STE 600	
		TAMPA, F1, 33602	■Remove
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Effective date, if other than the dat If an effective date is listed, the date must be:  Note: If the date inserted in this block document's effective date on the Depar	specific and cannot be prior t does not meet the applica			ing.) Pursuant to 605,0207 (3
e record specifies a delayed effective da rd is filed.	te, but not an effective tin	ne, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
Dated NOVEMBER 201H	2024	_ ·		
	PHANIE AMAALOU	F		
Sign	nature of a member or author	rized representative (	of a member	

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Filing Fee: \$25.00