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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
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			COVER LETTER	; .
	gistration Se Vision of Cor			A.
0115 ID 635		MULTI-SERVICES LLC		
SUBJECT:		Name of Limi	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return	n all correspo	indence concerning this matter	to the following:	
		JEANMARY PAUL		
			Name of Person	
		COMPANY		
			Firm/Company	· · ·
		6188 LAUREL LANE LA	NE APT A	
			Address	
		TAMARAC FLORIDA 33	319	
			City/State and Zip Code	
		jeanmarypaul87@gmail.com		
			to be used for future annual report not	ification)
For further	information c	oncerning this matter, please ca	ail:	
JEANMAR	Y PAUL		754 244-3240	
	Name o	f Person		ne Telephone Number
Enclosed is	a check for the	he following amount:		
\$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addres		Street Address:	ation
	egistration Sivision of C	Section Corporations	Registration Se Division of Co	
P .	O. Box 632	27	The Centre of	Fallahassee
Та	illahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	City , FIOTR	Zin Coda
	, Floric	ła
New Registered Office Address:	Enter Florida street address	
Name of New Registered Agent:		
and the state of t		
If amending the registered agent and/or registered ent and/or the new registered office address here:	office address on our records, enter the	name of the new registe
		υi
		• • • • • • • • • • • • • • • • • • • •
Mailing address MAY BE A POST OFFICE BOX)		j
nter new mailing address, if applicable:		1
The same of the sa		; 1
Principal office address MUST BE A STREET ADDR	(223	L~)
nter new principal offices address, if applicable:		
he new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" of	the abbreviation "L.L.C."
LASS MULTI-SERVICES LLC		
. If amending name, enter the new name of the limit	ed liability company here:	
his amendment is submitted to amend the following:		
lorida document number L23000447646		
he Articles of Organization for this Limited Liability Co	mpany were filed on 10/11/2023	and assigned
(A Florida	Company as it now appears on our records.) imited Liability Company)	

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
			□Add
			□Remove
			☐ Change
			□Remove
			□ Remove
			□Change
			□Add
			□Change
			□Remove
			[]]Change
			□Add
			□Remove
			☐ Change

Effective date, if other than the date of filing: (option fan effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filter: If the date inserted in this block does not meet the applicable statutory filing requirements, this continues the statutory filing requirements.	
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	ling.) Pursuant to 605.0207 late will not be listed as:
ocument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) is filed.	The 90th day after the
ated 10/11/2023 01/11/2023	
Signature of a member or authorized representative of a member	

Typed or printed name of signee