L23000 461416

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
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SECRETARY OF STATE
TALL ANASSEE FOR

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AUDIT MONITORING SERVICE 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 10/06/2023 and assigned Florida document number _____L23000461416 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: 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

Zip Code

If Changing Registered Agent, Signature of New Registered Agent

COVER LETTER

TO: Registration Division o	on Section f Corporations			
AUDI SUBJECT:	T MONITORING SERVICE LLC	C		
SUBJECT,	Name of L	imited Liability Company		
The enclosed Article	es of Amendment and fec(s) are si	ubmitted for filing.		
	respondence concerning this matte	-		
		Name of Person		
	TAX RESOLUTION CE	ENTRE		
	935B S. State Rd 7		023 DEC 27 SECRETAXY TALLAYE	
		Address	C 2	
	Planattion/ FL/ 33317		,,~<	
	-	City/State and Zip Code	fication)	
	treplantation@gmail.com			
For further informati	E-mail address: ion concerning this matter, please	to be used for future annual report noticall:	fication)	
Standley Tilerin		954 299-0375		
Na	me of Person	at () Area Code Daytim	e Telephone Number	
Enclosed is a check	for the following amount:			
■ \$25.00 Filing Fe	ce ☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	dress: on Section of Corporations	Street Address: Registration Sec Division of Con		
P.O. Box	6327	The Centre of T	allahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

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>	Name	Address	Type of Action
MGR	AF TRUSTED HOLDINGS LLC	1201 NOTTINGHAM CASPER WY, 82609	= Add
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			Change
		<u>.</u>	□Add
			□Remove
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fective date, if other than the one effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the De	be specific and cannot be pook does not meet the ann	dicable statutory	or more than 00 days	optional) after filing.) Pursua s, this date will no	nt to 605.0207 t be listed as
ecord specifies a delayed effective is filed.	date, but not an effectiv	e time, at 12:01 a	a.m. on the earlier o	of: (b) The 90th o	iay after the
NOVEMBER 14TH					
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Filing Fee: \$25.00