L23000543240

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COVER LETTER ,

´ Div	ision of Corpo	orations	:				
SUBJECT:	Hunter E. Ser	vices					
SOBJECT.		Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·			
The enclosed	l Articles of A	mendment and fee(s) are sub	omitted for filing.				
		dence concerning this matter	-				
		Ray Hunter					
			Name of Person				
		Hunter E.Services, LLC					
			Firm/Company		- · · · · · · · · · · · · · · · · · · ·		
		P.O. Box 8563					
			Address				
		Port St Lucie, FL 34985					
			City/State and Zip Code				
		rayfhunter@gmail.com E-mail address: (to be used for future annual (report notification)			
For further in	nformation con	scerning this matter, please c	all:		(2) (1) Tay (2)	2024	
Ray Hunter			772 215	5-7625		2024 E.T.R. 1 1	en year
	Name of F	erson		Daytime Telepho	ne Number		
Enclosed is a	a check for the	following amount:) (0) (-1)	PH ::	
≅ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl		\$60.00 Filing Feel Certificate of Status Certified Copy (additional copy is enclo	∞ &	
Ma	iling Address:		Street Ad	ldress:			

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HUNTER E. SERVICES, L.L.C.

(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 Companies Florida document number L23000543240	y were filed on 12/07/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
N/A		
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		RII PR
	Enter Florida street address	· 📆 🗴
	, Florida	
	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>	Address	Type of Action
MGR	Royce Hunter	10293 Village Pkwy	∃Add
		#208	□Remove
		Port St Lucie, FL 34987	Sa
			
			Remove
			☐ Change
			□Remove
			Change
			□Remove
			Change
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			03/03/2024			
If an effectiv <u>Note:</u> If th	date, if other than we date is listed, the date he date inserted in the s effective date on the	must be specific ar is block does not	ig:id cannot be prior t meet the applica	o date of filing or more ble statutory filing r	(optional) than 90 days after filing.) equirements, this date	Pursuant to 605.0207 (3 will not be listed as th
e record spord is filed.	ecifics a delayed effe	ective date, but no	ot an effective tin	ne, at 12:01 a.m. on	the earlier of: (b) The	: 90th day after the
Dated <u>Mar</u>	rch 04)' 2024			
	- UZ	Signature of a	member or author	rized representative of	a member	
	-					

Filing Fee: \$25.00