## L24000016510

	(Danuartada Naira)
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
	JUL ZO ZUZA

Office Use Only



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2024 J. 12 TITE 23

## **COVER LETTER**

VJ's Trash	Pick-Up Service IIc			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
	Vincent Luciano			
		Name of Person		
	VJ's Trash Pick-Up Servic	e Ile		
		Firm/Company		
	22484 National Forest Rd	732		
	-	Address		
	Sanderson, Fl 32087			
		City/State and Zip Code	<del></del>	
	E-mail address: (	to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
Vincent Luciano		904 676-1819 at ( )		
Name o	f Person	Area Code Daytin	e Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	□ \$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)	
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ction	
Registration Section Division of Corporations			Division of Corporations	
P.O. Box 6327			The Centre of Tallahassee	

Tallahassee, Fl. 32314

TO:

Registration Section Division of Corporations

> 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VJ's Trash Pick-Up Service lle

2021J. 32 71111:00

(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 01/08/2024 \_\_\_\_ and assigned Florida document number 124000016570 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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	<u>Address</u>	Type of Action
AMBR	MS Jessica Lynn Luciano	22484 NFR 732 Sanderson, Fl.32087	■Add
			□Remove
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		<del></del>	□Remove
			□Change

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<u>ote:</u> 10	e date, if other than the date of filing:
record Lis tiled	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
6 ated _	05/2024
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00