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COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT:	PRODISTE	C LLC					
SUBJECT.	-	Name of Lim	ited Liability Company				
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspor	ndence concerning this matter	to the following:				
		Lilian Garcia					
			Name of Person				
			Firm/Company				
		4370 NW 67 CT	Address				
		Coconut Creek FL 33073					
		lilian@thecreamgroup.com	City/State and Zip Code				
		E-mail address: (to be used for future annual report no	tification)			
For further in	nformation co	oncerning this matter, please ca	all:				
Lilian Garci	a		954 778-4015				
	Name of	Person		me Telephone Number			
Enclosed is a	a check for th	e following amount:					
□ \$25.00 I	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)			
Re Div P.C	iling Address gistration S vision of Co D. Box 632' Ilahassee, F	ection orporations 7	Street Address: Registration S Division of Co The Centre of 2415 N. Monr	orporations			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRODISTEC LLC				
(Name of the Limited Liabil (A Flord	lity Compan da Limited Li	y as it now appears on or ability Company)	ur records.)	
e Articles of Organization for this Limited Liability	Company v	were filed on 01/11/20	24	and assigned
rida document number 124000026301	·			
s amendment is submitted to amend the following:				
If amending name, enter the new name of the lin	nited liabil	ity company here:		
ODISTEC JANITORIAL & MAINTENANCE, LLC				
new name must be distinguishable and contain the words "Lin	mited Liabilit	ty Company," the designat	tion "LLC" or th	e abbreviation "L.L.C."
Inter new principal offices address, if applicable:		2908 NW 130th AVE		760
rincipal office address MUST BE A STREET ADD	RESS)	SUNRISE FL 33323		
				. 9
iter new mailing address, if applicable:				
lailing address MAY BE A POST OFFICE BOX)		···		2
				. 0
If amending the registered agent and/or registere ent and/or the new registered office address here: Name of New Registered Agent:		ddress on our record	s, <u>enter the n</u>	ame of the new regis
4270	NIW 67:1. (Court		
New Registered Office Address: 4370) NW 67th (Enter Florida stre	eet address	
Coco	onut Creek		, Florida	FL
	1"	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	ELISEO H LAFAURIE	2908 NW 130TH AVE Apt 105 Sunrise FL 33323	□ Add
			= Remove
			□Change
MGR	ELISEO H BAYTER	2908 NW 130TH AVE Apt 105 Sunrise FL 33323	■Add
			🗆 Remove
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			11/14/2	024			
(If an effect Note: If		date must be specifin this block does	filing: ic and cannot be p not meet the ap	prior to date of fil plicable statute) Pursuant to 605.0207 will not be listed as
he record : ord is filed		l effective date, bu	it not an effecti	ve time, at 12:0	l a.m. on the ea	arlier of: (b) Th	e 90th day after the
Dated	OVEMBER 14		2024				
		5(2)			√		
		Signature	of a member or a	authorized repres	sentative of a men	ıber	
		ELISE	·	بر <i>سەر</i> ر			

Filing Fee: \$25.00