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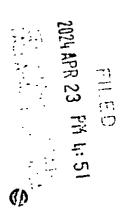
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04/23/24--01012--009 **25.00



COVER LETTER

Vanesaa Multi Service LLC
Name of Limited Liability Company

Registration Section
Division of Corporations

TO:

The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Vanesa	Name of Person	rrera
		Firm/Company	
	401 NW 13	Sth Way	
			_
	\\(\c\c\c\c\c\c\c\c\c\c\c\c\c\c\c\c\c\c	City/State and Zip Code	Camal cam
For further information on	Fi-mail address: (multiservice Ll to be used for future annual report notif	lication)
	-	an: $\frac{700}{6} \text{ at } (\frac{786}{786}) = \frac{334}{6}$ Area Code Daytime	Telephone Number
Enclosed is a check for the	e following amount:		
幺 \$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 Address: Registration So Division of Co P.O. Box 6327	ection prporations	Street Address: Registration Sec Division of Cor The Centre of T	porations
Tallahassee, F	L 32314	2415 N. Monroe Tallahassee, FL	e Street, Suite 810 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Vanessa Multi Service	
Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.) any)
The Articles of Organization for this Limited Liability Company were filed o	in $04 - 01 - 2029$ and assigned
Florida document number <u>L 24 000153926</u> .	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compar	ny 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)	
	23 F
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	TO TO
B. If amending the registered agent and/or registered office address on a agent and/or the new registered office address here:	4.5
Name of New Registered Agent:	
New Registered Office Address:	
Ente	r Florida strvet address
	, Florida
Cin-	Zip Code

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with it 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

tf amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being addor removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
<u>AMBR</u>	Vanessa Vasquez	Herrery 401 NW 135th	Way DAdd
		Plantation FL.	33325 ⊐Remove
			□ Change
			□Add
			□ Remove
			□ Add
			□ Remove
			□ Change
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			□Remove
			□Change
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			□Add
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			☐ Change

		
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(If an effectiv <u>Note:</u> If t	e date, if other than the date of filing:	to 605.0207 oc fisted as
If the record so record is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day	y after the
Dated <u></u>	D4-17-24	
	Signature of a member of authorized representative of a member	