

L24000219420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

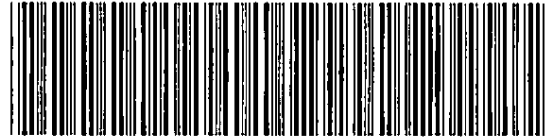
(Document Number)

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RECEIVED
2024 MAY 30 AM 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2024 MAY 30 AM 10:46
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Magna Multiservices, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jannina Fernandez De Castro Savinon

Name of Person

Magna Multiservices, LLC

Firm/Company

7130 S Orange Blossom Tr. Suite 110

Address

Orlando, FL 32809

City/State and Zip Code

jluis@jlwvs.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jluis Ramos

407 6924239

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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)

Mailing Address:

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

Street Address:

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**

(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 May, 10 2024 and assigned
Florida document number L24000219420.

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)

7130 S Orange Blossom Tr. Suite 110	2024 MAY 30 AM 10:16	FILED
Orlando, FL 32809		

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:

7130 S Orange Blossom Tr. Suite 110

Enter Florida street address

Orlando

City

Florida

32809

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Jannina Fernandez De Castro Savin	7130 S Orange Blossom Tr. Suite 110	<input checked="" type="checkbox"/> Add
		Orlando, FL 32809	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Lerisse E. Jimenez Espinosa	7130 S Orange Blossom Tr. Suite 110	<input type="checkbox"/> Add
		Orlando, FL 32809	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Cesar Mercedes	7130 S Orange Blossom Tr. Suite 110	<input type="checkbox"/> Add
		Orlando, FL 32809	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Juan Luis Ramos Borges	7130 S Orange Blossom Tr. Suite 110	<input type="checkbox"/> Add
		Orlando, FL 32809	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 5/30, 2024

J. F. DeCastro
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Jannina Fernandez De Castro Savinon

Typed or printed name of signee