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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: P&F ABA SERVICES 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:

MEIBY FERNANDEZ ROJAS

Name of Person

P&F ABA SERVICES LLC

Firm/Company

7434 S. FEDERAL HWY

Address

PORT SAINT LUCIE, FL, 34952

City/State and Zip Code

PFABASERVICES@GMAIL.COM

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

For further information concerning this matter, please call:

MEIBY FERNANDEZ ROJAS

786

510-2528

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

P&F ABA SERVICES LLC

(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 07/24/2024 and assigned Florida document number 1.24000328998.

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)

7434 S. FEDERAL HWY

PORT SAINT LUCIE, FL, 34952

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7434 S. FEDERAL HWY

PORT SAINT LUCIE, FL, 34952

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:

7434 S. FEDERAL HWY

Enter Florida street address

PORT SAINT LUCIE

City

Florida

34952

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.

Signed by:

MELBY FERNANDEZ ROJAS

1A108E83A4384AA

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 | MEIBY FERNANDEZ ROJAS | 7434 S. FEDERAL HWY | <input type="checkbox"/> Add |
| | | PORT SAINT LUCIE, FL. 34952 | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| AMBR | ADIANNA ROMANES | 7434 S. FEDERAL HWY | <input type="checkbox"/> Add |
| | | PORT SAINT LUCIE, FL. 34952 | <input type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
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[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)

Dated AUGUST 14TH 2024

Typed or printed name of signee