L24000 347544

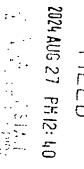
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filling Officer:
Special Instructions to Filling Officer:
J. July 30
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Office Use Only



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08/27/24--01012--014 **25.00



COVER LETTER

Mailing Address:
Registration Section

P.O. Box 6327

Division of Corporations

	RVICES, LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	FRANCOISE J. BLANCO		
		Name of Person	
	BLANCO LAW FIRM PLI	c	
		Firm/Company	
	1825 PONCE DE LEON B	LVD 501	
	-	Address	
	CORAL GABLES, FL 331	34	
		City/State and Zip Code	
	FB@BLANCOINTL.COM		
	E-mail address: (t	o be used for future annual report notific	cation)
For further information c	oncerning this matter, please ca	dl:	
FRANCOISE J. BLANC	ro	305 962-0944 at ()	
Name o	f Person		Telephone Number
Enclosed is a check for the	he 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)

Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A & M SERVICES, LLC

2024 AUG 27 PM 12: 40 (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 $\frac{08/08/2024}{1}$ and assigned Florida document number L24000347544 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:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

_, Florida ___

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	MATTHEW CATALA	1825 PONCE DE LEON BLVD 501	Add
		CORAL GABLES FL 33134	□Remove
			□ Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗖 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

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ctive date, if of	her than the date of	filing;		(optic	onal)
effective date is lis	ted, the date must be speci-	fic and cannot be prior		ore than 90 days after	filing.) Pursuant to 605.020 date will not be listed as
	date on the Departmen			g requirements, tills	date will not be fisted as
cord specifies a d filed.	elayed effective date, be	ut not an effective t	ime, at 12:01 a.m. o	on the earlier of: (b) The 90th day after the
		2027			
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ed AUGUST 15		e of a member or auth	M/JM() orland representative	of a member	

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