L10000056067

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COVER LETTER

TO:	Registration Se Division of Cor			
CHD IE		A SUPERIOR CLEANING LI	.c	
SUBJE	.CI:	Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please 1	eturn all correspo	ndence concerning this matter	to the following:	
		Cesar A. Vargas		
			Name of Person	
		Bay Area Superior Cleaning	ng LLC	
			Firm/Company	
		2203 Colville Chase Dr		
		•	Address	
		Ruskin, FL 33570		
			City/State and Zip Code	
		cevaes64@gmail.com		
		E-mail address: (to be used for future annual report notific	cation)
For furt	her information c	oncerning this matter, please ca	all:	
Cesar A	A. Vargas		813 407-6057	
	Name o	f Person		Telephone Number
Enclose	ed is a check for th	ne 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:

TO:

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bay Area Superior Cleaning LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our records Liability Company)	<u>s.</u>)
he Articles of Organization for this Limited Liability Company lorida document number $\frac{L10000056067}{L10000056067}$.	were filed on	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC"	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	114 siobhan Avenue	
Principal office address MUST BE A STREET ADDRESS)	Tampa, FL 33613	
Enter new mailing address, if applicable:	114 siobhan Avenue Tampa, FL 33613	
Mailing address MAY BE A POST OFFICE BOX)		ω
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		2.3.5 73
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u> </u>
	, F10	oridaZip 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>	Type of Action
MGR	Maria Elena Bueno	2203 Colville Chase Dr	☐ Add
		Ruskin, fL 33570	Remove
			Change
MGR	Bruna Camila Micko	114 Siobhan Avenure	■ Add
		Tampa, FL 33613	□ Remove
			□ Change
			□ Remove
			Add ☐ Remove
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be pre- e: If the date inserted in this block does not meet the appument's effective date on the Department of State's record	or to date of filing of its licable statutory f			
record specifies a delayed effective date, but r ne 90th day after the record is filed.	not an effectiv	e time, at 12:01	l a.m. on th	ie earlier
ed October 26 , 2017	·, ,			
Un A	- Va	<u>^</u>		
Signature of a/member or au				

Page 3 of 3

Filing Fee: \$25.00