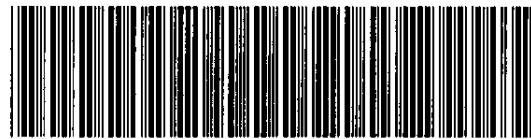


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11/16/11--01020--008 **25.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NOV 16 2011
EXAMINER

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TALLAHASSEE, FLORIDA
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COVER LETTER

**TO: Registration Section
Division of Corporations**

**SUBJECT: BAY 2 BAY MASTER PAINTING & CLEANING SERVICES
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:

ANDRE SHERMAN

Name of Person

BAY 2 BAY MASTER PAINTING & CLEANING SERVICES

Firm/Company

7008 N ROME AVE

Address

TAMPA FL 33604

City/State and Zip Code

INFO@ELITEDIVERSIFIEDSOLUTIONS.COM

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

For further information concerning this matter, please call:

ANDRE SHERMAN

Name of Person

at (813)

3338255

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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 NOV 15 AM 11:14

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 7, 2011

ANDRE SHERMAN
7008 N ROME AVE
TAMPA, FL 33604

SUBJECT: BAY 2 BAY MASTER PAINTING & CLEANING SERVICES L.L.C
Ref. Number: L11000111084

We have received your document for BAY 2 BAY MASTER PAINTING & CLEANING SERVICES L.L.C and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 011A00025212

2011 NOV 15 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

BAY 2 BAY MASTER PAINTING & CLEANING 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 SEP 28TH, 2011 and assigned Florida document number L11000111084.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 7008 N. ROME AVE
(Principal office address MUST BE A STREET ADDRESS) TAMPA FL 33604

Enter new mailing address, if applicable: 7008 N. ROME AVE
(Mailing address MAY BE A POST OFFICE BOX) TAMPA FL 33604

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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: ANDRE SHERMAN

New Registered Office Address: 7008 N. ROME AVE
Enter Florida street address

TAMPA FL, Florida 33604
City 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	FELICIANO, RICHARD	7226 DONALD AVE SUITE A TAMPA FL 33614	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	SHERMAN, ANDRE	7008 N ROME AVE TAMPA FL 33604	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

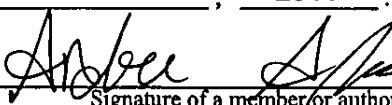
SECRETARY OF STATE
 TALLAHASSEE
 FLORIDA

2011 NOV 15 AM 11: 16

FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated NOV 3RD, 2011



 Signature of a member or authorized representative of a member

ANDRE SHERMAN

 Typed or printed name of signee