## L12000113328

(Re	questor's Name)			
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09/28/12--01010--018 \*\*25.00

12 SEP 28 PM 12: 12

OCT - 1 2012

T. HAMPTON

## **COVER LETTER**

Division of Co	rporations		
SUBJECT:	Ches	stine, LLC	
	Name of Limite	d Liability Company	
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return all corresp	ondence concerning this matter to	the following:	
		leffrey N Chestine	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
		Name of Person	
		Chestine, LLC	
		Firm/Company	
		650 Jamaica Blvd	
		Address	
	Sate	ellite Beach, Fl 32937	
		City/State and Zip Code	
	gloria@	beachsidecleaning.com be used for future annual report notification	on)
For further information	concerning this matter, please cal	-	, , , , , , , , , , , , , , , , , , ,
or runder mioritation	concerning this matter, prease car	1,	
	rey N Chestine		4 0730
Name o	of Person	Area Code & Daytime Tel	lephone Number
Enclosed is a check for t	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

**Registration Section** 

**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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILLED SEGRETARY OF STATE DIVISION OF CORPORATIONS

12 SEP 28 PM 12: 12

	Chestine, LLC		
( <u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appear a Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	09/04/2012	and assigned
Florida document number <u>L12000113328</u>	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company her	<u>.</u> e.	
Beach	nside Cleaning, LLC		
The new name must be distinguishable and end with the w "L.L.C."	vords "Limited Liability Compa	my," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
<u>(Principal office address MUST BE A STREET ADI</u>	ORESS)		
	***************************************		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street add	ress
		, Florida	
	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 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 = Man MGRM = M	ager ' anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
	AMBRANCH AND A ST. TO THE ST. TO		Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if <u>nec</u> essary.)	SECRETARY OF STATE STATE OF ST
Dated <u>O9</u>	- 26- 2017 ,	rey N. Chestine	
	Typed	l of printed name of signee	

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Filing Fee: \$25.00