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### **COVER LETTER**

TO: Registration Section

Tallahassee, FL 32314

Division of Co	rporations			
SUBJECT:	DR NOUSE Name of Lin	CLEANING  nited Liability Company	LLC	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		31¥1 <b>19</b>
Please return all correspondent	ondence concerning this matter	to the following:		AON CONTRACTOR
		FIANCA MA  Name of Person  SE CLEANING  Firm/Company		27 AHII: 25
	938 ALM	eria Road Address		
		City/State and Zip Code  US 123 @ YAhoo  to be used for future annual report not	•	5 - 1109
For further information of	concerning this matter, please c	all:		
KATIA Name o	MA rq UES of Person	at (954) 632 Area Code Daytin	- 3050 ne Telephone Number	_
Enclosed is a check for t	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 Certificate of Certified Cop (additional copy	f Status &
Mailing Address Registration Division of C P.O. Box 632	Section Corporations	Street Address: Registration Se Division of Co The Centre of T	porations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT

ARTICLES OF O	RGANIZATION Z GE
О	F 27 ST
(Name of the Limited Liability Compandation for this Liability Compandation fo	were filed on 01-08-2016 and assigned
Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
Check CLEANING	LLC
The new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	938 ALMERIA ROAD
(Principal office address MUST BE A STREET ADDRESS)	West PALM BEACH -
	FLOY10A - 33405
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	938 ALUETIA ROAD WEST PALM BEACH FLOHIDA - 33405
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registere
17	C. a. 1/a. //a. / a. C.

Name of New Registered Agent:

FLORIDA

City

KATIA FRANCA UARQUES

UARQUES

Enter Florida street address

FLORIDA

City

Florida

Tip Code

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.

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>	Address	Type of Action
MGR	KATIA FLANCA MARQUES	938 ALUEVIA ROAD/WPB/F	Z □Add
			□Remove
		<del></del>	XChange
			□Add
			□Remove
			□Change
			🗆 Add
		<del></del>	□Remove
			Change
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		<del></del>	□Remove
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(If an ef Note:	fective date, if other than the date of filing:
he ree The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	NOV 22, 2019
	Signature of a member or authorized representative of a member