

L160000 78642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

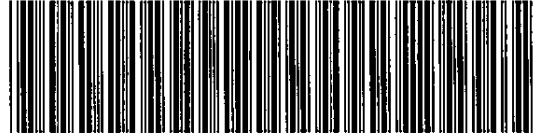
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2016 AUG -1 AM 8:22

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16 AUG -1 PM 3:24
TALLAHASSEE, FLORIDA
CLERK OF COURT

AUG 02 2016

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CLEAR BUILDING SOLUTIONS LLC

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:

NARA CRISTINA IBEN

Name of Person

CNA BOOKKEEPING SERVICES LLC

Firm/Company

1108 KANE CONCOURSE SUITE 205-B

Address

BAY HARBOR ISLAND, FL 33154

City/State and Zip Code

CNABOOKKEEPER@GMAIL.COM

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

For further information concerning this matter, please call:

CRISTINA IBEN

305 866-7740
at ()

Name of Person

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

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

CLEAR BUILDING SOLUTIONS 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 04/21/2016 and assigned Florida document number L16000078642.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SUPERIOR PAINTING SOLUTIONS LLC

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:

Enter Florida street address

_____, 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 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

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16 AUG - 9
PM 3:24
TALLAHASSEE, 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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

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6 AUG - 1 PM 3:24
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COMMUNITY DEVELOPMENT
KELLSBURG, IOWA

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

Multiple horizontal lines for amending information.

16 AUG - 1 PM 3:24
DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated JULY, 27TH, 2016

Orlando Sales

Signature of a member or authorized representative of a member

ORLANDO J SALES

Typed or printed name of signee

Certificate of Status

I certify from the records of this office that CLEAR BUILDING SOLUTIONS LLC, is a limited liability company organized under the laws of the State of Florida, filed electronically on April 21, 2016, effective April 21, 2016.

The document number of this company is L16000078642.

I further certify that said company has paid all fees due this office through December 31, 2016, and its status is active.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

Authentication Code: 160422153518-700284882067#1

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Twenty Second day of April, 2016



Ken Detzner
Ken Detzner
Secretary of State

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L16000078642
FILED 8:00 AM
April 21, 2016
Sec. Of State
vherring

Article I

The name of the Limited Liability Company is:

CLEAR BUILDING SOLUTIONS LLC

Article II

The street address of the principal office of the Limited Liability Company is:

2020 NE 135TH STREET
NORTH MIAMI, FL. 33154

The mailing address of the Limited Liability Company is:

1108 KANE CONCOURSE
205-B
BAY HARBOR ISLANDS, FL. 33154

Article III

The name and Florida street address of the registered agent is:

CNA BOOKKEEPING SERVICES LLC
1108 KANE CONCOURSE
SUITE 205-B
BAY HARBOR ISLAND, FL. 33154

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: NARA CRISTINA IBEN

Article IV

The name and address of person(s) authorized to manage LLC:

Title: AMBR
ORLANDO J SALES
2020 NE 135TH STREET
NORTH MIAMI, FL. 33181

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FILED 8:00 AM
April 21, 2016
Sec. Of State
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Article V

The effective date for this Limited Liability Company shall be:

04/21/2016

Signature of member or an authorized representative

Electronic Signature: NARA CRISTINA IBEN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.