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S. WARREN AUG 0 1 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: FS+Vaga's Cleaning Strvicts 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:
Tania Estrada Name of Person
Estradas Cicaning Stwicts LLC Firm/Company
1080 S. hoggland blud # 188 Address
City/State and Zip Code
City/State and Zip Code  M. Olos (OCIGO 11 @ GMO1) · (OM)  E-mail address: To be used for future annual report notification)
For further information concerning this matter, please call:
Torsion ES-tycocoa at
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee \& \Bigcup \$55.00 Filing Fee \& \Bigcup \$60.00 Filing Fee, Certificate of Status \$\Bigcup \$ Certificate of Status \& Certified Copy (additional copy is enclosed)  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

(Name of the Limited Liability (A Florid	hity Company as it now appears on our records.)  Ja Limited Liability Company)
-	Company were filed on G7-19 and assigned
This amendment is submitted to amend the following:	<u>1     </u> .
A. If amending name, enter the new name of the lim	nited liability company here:
Estrada's Claning Scholar The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1080s haagland blud
(Principal office address MUST BE A STREET ADDI	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	1080 s. hoogiand blud Itilik Kissimmee Fl 34741
B. If amending the registered agent and/or registered agent and/or the new registered office add	istered office address on our records, enter the name of the new dress here:
Name of New Registered Agent:	inia Estrada
New Registered Office Address: \O ?	805. 1000 Jana 10100 # 188 Enter Florida street address
<u>Ľ.</u>	155i mmcc , Florida 3474) 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.

Tonio Estyodo III- III Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

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fective date, if other than neffective date is listed, the date	must be specific ar	ng:nd cannot be prior t	o date of filing or mor	e than 90 days after f	<b>nal)</b> Iling.) Pursuant t	to 605.02
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record specifies a dela The 90th day after the			an effective tin	ne, at 12:01 a.	m, on the e	earlier
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Manbel	Olasco	×9a				<b></b> *::
	Olasco Signature of a	XG &	rized representative of	a member	JUL 27	— <u>···</u>
Mañbel  Mañbel		COGG Types or printed		a mcmber	JUL 27 PH	- <u>n</u>

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Filing Fee: \$25.00