L21000222951

(Re	equestor's Name	· · · · · · · · · · · · · · · · · · ·
(Ad	ldress)	
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(Cit	ty/State/Zip/Phor	ne #)
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(Dc	cument Number)
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COVER LETTER

TO: Registration Section Division of Corporations	
subject: <u>Agwilera</u>	Cleaning and Lands caping. Services LC Name of Limited Liability Company
The enclosed Articles of Amendment a	and fee(s) are submitted for filing.
Please return all correspondence conce	erning this matter to the following:
	Elaine Tudela Marzo Name of Person
	Firm/Company
	4477 17m Street West
	Bradenton, FL 34207 City/State and Zip Code Yesy_020 ya hoo. com E-ntail address: (to be used for filture annual report notification)
For further information concerning this	
Elaine Tudela Name of Person	Marzo at (786) 999 – 4835 Area Code Daytime Telephone Number
Enclosed is a check for the following a	iniount;
	Filing Fee & S55.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aguilera Cleaning and Landscap 216 Ser Bitels 26LC (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 v Florida document number $\frac{L2100022295}{L}$	vere filed on <u>05</u>	13/2021 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company." the designa	tion "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 ac agent and/or the new registered office address here: Name of New Registered Agent:	ldress on our record	ls, enter the name of the new registered
New Registered Office Address:		
New Neglinered Office Address.	Enter Florida sti	eet address
		, Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my a ovided for in Chap	luties, and I am familiar with and ter 605, F.S. Or, if this document is

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 = Ma AMBR = Au	anager ithorized Member		
Title	<u>Name</u>	Address 1 SEP 20 PH 1: 25	Type of Action
AMBR	Elaine Tudela Marzo	4477 17th Street West Bradenton, FL 34207	XAdd
			□Remove
			□Change
			□ Add
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ctive date, if other than the date of filing: _	05/12/2021 (optional)
effective date is listed, the date must be specific and can	mot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
ument's effective date on the Department of State	the applicable statutory filing requirements, this date will not be listed of seconds.
ord specifies a delayed effective date, but not an offiled.	effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Theu.	
od 05/25/	2021
	ber or authorized representative of a member