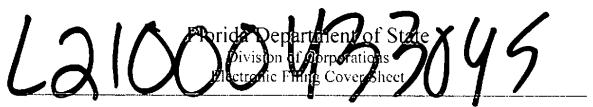
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220000632263)))



H220000632263ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	Division of Corporations Fax Number : (850)617-6383		
From:	Account Name : LEGALZOOM.CCM INC. Account Number : 120010000062 Prone : (323)962-8600 Fax Number : (323)962-3889		
	the email address for this business en ual report mailings. Enter only one or		
Ema	il Address:		23
	LLC AMND/DESTATE/CODDECT C	D M/MC DES	
<u> </u>	LLC AMND/RESTATE/CORRECT C THE BUMBLE BEE CLEANING S		SIGN ==
I			.c
I	THE BUMBLE BEE CLEANING S	SERVICES LL	SIGN E
]	THE BUMBLE BEE CLEANING S Certificate of Status	SERVICES LL	SIGN = ==================================
- X 127 127 127	THE BUMBLE BEE CLEANING S Certificate of Status Certified Copy	SERVICES LL 0 1	SIGN E
- k 2-27 70 	THE BUMBLE BEE CLEANING S Certificate of Status Certified Copy Page Count	0 1 05	SIGN E
1	THE BUMBLE BEE CLEANING S Certificate of Status Certified Copy Page Count	0 1 05	SIGN E
	THE BUMBLE BEE CLEANING S Certificate of Status Certified Copy Page Count	0 1 05	SIGN E

T. LEMIEUX FEB 18 2022

TO:

Registration Section

From: Danielle Gervasi

COVER LETTER

Div	ision of Cor	porations		
enpance.		BLE BEE CLEANING SERV	ICES LLC	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		101 N Brand Blvd 11th Fl		
			Address	
		Glendale, CA 91203		
		······································	City/State and Zip Code	
		Grgtejada89@gmail.com		
		E-mail address: (to be used for future annual report notifi	cation)
For further in	nformation C	oncerning this matter, please ca	all:	
Cheyenne M	1oscley		800 773-0888	
	Name o	f Person	at () Area Codc Daytime	Telephone Number
Enclosed is a	s check for th	ne following amount:		
□ \$25.00 F	iling 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)
	MAIL	ING ADDRESS:	STREET/COURIE	TD ANNDESS.

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

To: +18506176383

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE BUMBLE BEE CLEANING SERVICES LL			
(Name of the Limited Liability Cor (A Florida Limit	npany as it now appears on o led Liability Company)	ur records.)	
The Articles of Organization for this Limited Liability Compa	any were filed on 10/04/20)21	and assigned
lorida document number L21000433045			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited l	iability company here:		
mperium Cleaning Professionals LLC			
he new name must be distinguishable and contain the words "Limited L	iability Company," the designa	tion "LLC" or the a	bbreviation "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		records, enter	the name of the
registered agent and/or the new registered office address l	<u>nere</u> :		<i>[</i> 2]
		, * · ·	, 1/2
Name of New Registered Agent:	·	• • • • • • • • • • • • • • • • • • • •	
New Registered Office Address:			
	Enter Florida str	eet oddress	7 ::(;
	···	, Florida	11 1
	City	•	Zip Code
New Registered Agent's Signature, if changing Registered Age	·		•

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.

_ Change

Page: 4 of 6

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

LegalZoom.com, Inc.

	Add □ Remove
	☐ Remove
•	□ Change
	Remove
	Change
	Remove
	_ Change
	Add ·
	Remove
	☐ Change
	Add
————————————————————————————————————	□ Remove
	☐ Change
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	☐ Remove

: If am	ending any other information, enter change(s) here: (Auach additional sheets, if necessary.)
:	·
-	
•	
•	
-	
•	
-	
-	
•	
-	
•	
-	
Note:	ive date, if other than the date of filing: (optional) ective 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 603.0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
e red The	ford 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	02-11-2022
	The member of authorized representative of a member
	George Tejada
	Typed or printed name of signee