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To:		4	<u></u>
	Division of Cor	porations	<u> </u>
	Fax Number	: (850)617-6383	
		Y	
			<u>.</u> .
From:			÷*
		: UNION HSA LLC	
	Account Number	: I20150000070	
	Phone	: (954)770-6227	
	Fax Number	: (954)369-4446	~
	Lax Million	, (954)503 4410	
			<u> </u>
•*Enter	the email address	s for this business entity to b ings. Enter only one email addre	e used for futuress please.**
an	inual report mail	ings. Enter only one imale open	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN M.F. CLEANING MAINENANCE LLC

Certificate of Status	0
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Corporate FilingCM2017

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M.F. Cleaning Maintenance LLC			
(Name of the Limited Liability Company (A Florida Limited Liab	us it now amears on our records.)		
The Articles of Organization for this Limited Liability Company we Florida document number <u>L17000203192</u>	ere filed on 10/02/2017		and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabilit	y company here:		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" of	n the sb	breviation "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 officers here:		enter	the name of the new
B. If amending the registered agent and/or registered our registered agent and/or the new registered office address here:	ce address on our records,	<u>enter</u>	சி
Name of New Registered Agent:			<u> <del>2</del></u>
New Registered Office Address:	Enter Florida street address	1.	<del>- 5</del>
	City Flor	rida _	Zip Code
New Rogistered 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 pr being filed to merely reflect a change in the registered office of	verjormance of my auties, and provided for in Chapter 605. F	T.S. Oi	r, if this document is

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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

Title	Name	Address	Type of Action
MGR	Fabiola Paz	400 SW 1st Ave # 1709	Add
		Fort Lauderdale, FL 33301	Remove
			Change
MGR	Geni A. Fernandes	10051 NW 37th Street	<b>=</b> Add
		Coral Springs, FL 33065	□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
	·		U-Remove
		<u></u>	Change
			9 Add
			П Remove
			☐ Change
			Remove
			☐ Change

1) WHEN WE SEARCH FOR OUR BUSINESS NAME AT THE SUNBIZ WEBST	THE STREET THE
THE TAXABLE TO THE PROPERTY OF	TE, THE LETTER 1 IS
MISSING ON THE NAME MAINTENANCE. WOULD YOU PLEASE MAKE TH	HE CORRECTION?
2) ALSO, COULD YOU PLEASE ADD THE EIN: 20-4607196 SO IT APPEAR A	T THE SUNBIZ WEBSITE.
THANK YOU FOR YOUR ATTENTION!!!!	
	·
	Marian Bar An Gr
fective date, if other than the date of filing:  un effective date is listed, the date must be specific and cannot be prior to date of filing or more than  the date is listed, the date must be specific and cannot be prior to date of filing or more than	(optional) (optional) 190 days after filing.) Pursuant to 6
on effective date is listed, the date must be specific and cannot be prior to use of ming of while date interested in this block does not meet the applicable statutory filing requisecument's effective date on the Department of State's records.	rements, this date will not be i
	•
record specifies a delayed effective date, but not an effective time, and the fective ti	at 12:01 a.m. on the ea
October 25 2017	
Fabiols Paz	
Signature of a number or authorized representative of a m	ember

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