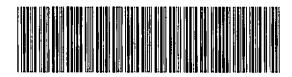
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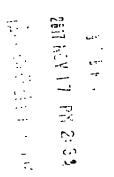
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J. HARRIE

COVER LETTER

Division of Co	rporations		
M&P CO! SUBJECT:	MPLETE CLEANING SERVIC	ES LLC	
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Phillip L. Pearson		
		Name of Person	
	M&P COMPLETE CLEA	NING SERVICES LLC	
		Firm/Company	
	15350 Amberly Drive Uni	t 4321	
		Address	
	Tampa, Florida 33647		
		City/State and Zip Code	
	mpgeturdone@gmail.com	to be used for future annual report notif	**************************************
For further information	concerning this matter, please or	·	icanon)
Miguel A. Mitchell		813 215-0362 at ()	
Name	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for t	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

Registration Section

TO:

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

M&P COMPLETE CLEANING SERVICES LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.) pility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number L04000013179	ere filed on 02/18/2004	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" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET ADDRESS)	Ĩ.	r.p ero
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Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		3 (
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-		75.00
3. If amending the registered agent and/or registered offic egistered agent and/or the new registered office address here:	e address on our records, enter	the name of th
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

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>	Type of Action
MGR	Margie S. Pearson	3913 E. Jean Street	□ Add
		Tampa, Florida 33610	Remove
			□ Change
			Add
		 	Remove
			☐ Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change
			A A A A A A A A A A A A A A A A A A A
			□ Remove
			Change
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Effective date, if other than the fan effective date is listed, the date must Note: If the date inserted in this blocument's effective date on the Determinant of the date in the Determinant of the Period of the Period of the Poth day after the record specifies a delayed.	t be specific and cannot be prior to ock does not meet the applicate epartment of State's records. effective date, but not	ble statutory filing red	uirements, this date	will not b	e listed a:

Filing Fee: \$25.00