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(,	Address)	
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SEPREMENT OF SIME

S. HAWKES

OCT 2 0 2009

EXAMINER

COVER LETTER

TO:	Registration Se Division of Co		r
SUBJE	ст: <u>Всі</u>	ans Press Name of Limi	ited Liability Company
The end	closed Articles of	Amendment and fee(s) are sub	bmitted for filing.
Please 1	eturn all correspo	ondence concerning this matter	to the following:
		Brian	H < S S Name of Person
		Brians P	Firm/Company
		3466 r	nalaga way Additess
		Naples	City/State and Zip Code
		E-mail address: (to be used for future annual report notification)
For furt	her information o	concerning this matter, please of	•
B	/ i ac \	Hes S of Person	at (239) 293 2664 Area Code & Daytime Telephone Number
Enclose	ed is a check for t	he following amount:	
∑ \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, 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

Brians Pressure (Name of the Limited Liab (A Flori	Cleaning AL ility Company as it now appears da Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liabilit	•	14 / 0 4 and assigned
This amendment is submitted to amend the following	3:	
A. If amending name, enter the new name of the	limited liability company here	:
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compan	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or registered agent and/or the new registered office s		ir records, enter the name of the new
Name of New Registered Agent:	- And - IN-TANCE -	
New Registered Office Address:	Ente	r 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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

Title Name Address Type of Action

M6RM Christian Aceves 433 Pine Ave Remove

Add Remove

Add Remove

Add Remove

<u> </u>	
	Add F
	Add
D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	Oct 16 / , 09.
R	
Drio	nD Hess Brian D Hess Pres., Owner
	/ Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member Scian D + ess

Page 2 of 2

Filing Fee: \$25.00