L06000032983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

AUG - 4 2009

EXAMINER

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 4, 2009

KAREN E. PHILLIPS
PERSONAL TOUCH CLEANING SERVICE LLC
P.O. BOX 2325
PALM CITY, FL 34991

SUBJECT: PERSONAL TOUCH CLEANING SERVICE, LLC
Ref. Number: L06000032983

We have received your document for PERSONAL TOUCH CLEANING SERVICE, LLC and your check(s) totaling $30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 609A00026641

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: PERSONAL TOUCH CLEANING SERVICE, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KAREN E. PHILLIPS
Name of Person

PERSONAL TOUCH CLEANING SERVICE, LLC
Firm/Company

P.O. BOX 2325
Address

PALM CITY, FLORIDA 34991
City/State and Zip Code

personaltouchcs@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KAREN E. PHILLIPS at (772) 579-3776
Name of Person — Area Code & Daytime Telephone Number

Enclosed is a check for 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

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

FILED
2009 AUG 11 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PERSONAL TOUCH CLEANING SERVICE, LLC
(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 were filed on 3/28/2006 and assigned Florida document number L06000032983.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: MICHAEL J. PHILLIPS

New Registered Office Address: 2788 SW NEWBERRY COURT
Enter Florida street address

PALM CITY, **Florida** 34990
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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	MICHAEL J. PHILLIPS	P.O. BOX 880254 Port St. Lucie, FLORIDA 34983	☐ Add ☑ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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2009 AUG 11 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated AUGUST 7, 2009

Signature of a member or authorized representative of a member

KAREN E. PHILLIPS
Typed or printed name of signee

Filing Fee: $25.00