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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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October 25, 2013

JOSIE SMITH 301 W. FRAY ST. ENGLEWOOD, FL 34223

SUBJECT: PARADISE CLEANING SERVICES, LLC

Ref. Number: L06000057344

We have received your document for PARADISE CLEANING SERVICES, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

Please return 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) 245-6051.

Letter Number: 513A00024986

Agnes Lunt Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:

Registration Section Division of Corporations

Paradise Cleaning Services, 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:

Josie Smith			
Name of Person			
Paradise Cleaning Services, LLC			
Firm/Company	_		
301 W. Fray St.			
Address	= 3	2013	
Englewood, FI, 34223			7 to 174.
City/State and Zip Code	G; G;	25	j
paradisecleaning2@verizon.net	F-+	 -	227
E-mail address: (to be used for future annual report notification)		型 至	
For further information concerning this matter, please call:	**	(%) (%)	•
Josie Smith 941,270-2465			
Name of Person Area Code & Daytime Telephone Nun	ber		

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

Paradise cleaning Services, 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 2006 and assigned Florida document number_L06000057344 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Aparadise Cleaning Services 2, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 2613 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: New Registered Office Address: Enter Florida street address City

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

<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Add
			Remove
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f amending any other information, enter change(s) here: (Attach additional shee	ns, y necessury.)
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d <u>10-18-13</u> ,	
Osein C. Smirth	
Signature of a member or authorized representative of a me JOSie C. Smith Typed or printed name of signee	mber
Josie C. Smith Typed or printed name of signee	
Page 3 of 3	
Filing Fee: \$25.00	2013 KCW
	25
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