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## .COVER LETTER

-	of Corporations
SUBJECT:	Name of Limited Liability Tompany
The enclosed Ar	icles of Amendment and fee(s) are submitted for filing.
Please return all	correspondence concerning this matter to the following:
	Loretta Ash Name of Person
	Laretta Walsh Cleaning Service, LLC
	945 Ogk Ridge Rd.,
	St. Augustine FL 32086 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further infor	nation concerning this matter, please call:
Lorett	Name of Person at (904) 392-7260 Area Code Daytime Telephone Number
Enclosed is a ch	ck for the following amount:
\$25,00 Filin	Fee \$\Bigcup \\$30.00 \text{ Filing Fee & } \Bigcup \\$55.00 \text{ Filing Fee & } \Bigcup \\$60.00 \text{ Filing Fee, } \\ \text{Certificate of Status} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \\ (addi

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

18 HAR 12 PH 2: 12

FALLED

SECRETARY OF STATE

FLORIDA

Loretta Walsh Cleaning Service LLC

company has been notified in writing of this change.

(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 v	vere filed on July 24, 2006	and assigned
Florida document number L06000073534		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Ash Enterprises & Services LLC		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	945 Oa	ik Ridge Rd.
(Principal office address MUST BE A STREET ADDRESS)	St. Pugu	stine, Sh. 32086
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	C . Cl	
	Enter Florida street addre	22),
	, F	lorida
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as properties.	performance of my duties, c	and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
SBMA	Jesscher Ash	945 Oak Ridge Rd. St.	Pug S Add
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		<u> </u>	Change
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Tective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior to date of filing.	(optional)
n effective date is listed, the date must be specific and cannot be prior to date of filinger. If the date inserted in this block does not meet the applicable statutor current's effective date on the Department of State's records.	ng or more than 90 days after filing.) Pursuant to 605.020 by filing requirements, this date will not be listed as
record specifies a delayed effective date, but not an effect The 90th day after the record is filed.	tive time, at 12:01 a.m. on the earlier o
red March 1 , 2018.	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00