L06000086650

(Red	questor's Name)	
(Add	dress)	
· (Add	dress)	
(City	//State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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10/09/13--01027--012 **30.00

FILED
SECRETARY OF STATE
ALL ALLASSEE FLORIDA

Amend NC

10/8/13



October 10, 2013

BETTY C MULHALL 57 EASTLAKE DR PALM COAST, FL 32137

SUBJECT: BETTY'S PRO WINDOW CLEANING LLC

Ref. Number: L06000086650

We have received your document for BETTY'S PRO WINDOW CLEANING 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 sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6051.

Letter Number: 613A00023874

Tammy Hampton
Regulatory Specialist III
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

Division of Corp			
SUBJECT: BETT	VS PRO WINDON	CLEANING CLC	
		ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are subn	mitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	BETTY C.	Name of Person VINDOW CLEAVING Firm/Company	
	_	Name of Person	
	RETTUS PRO U	UNDOW CLEANING	ELC
		Firm/Company	
	57 EASTLA		
	O / CHOICHI	Address	
	0.101	*	
	PALMI COAST	FL 32/37 City/State and Zip Code	
	MULHALLSA	City/State and Zip Code OATT. No T Die used for future annual report notification	
	E-mail address: (to	be used for future annual report notification	on)
For further information co	oncerning this matter, please ca	all:	
0-11	1	201 a. 3 Qu	\ ~
BETTY C M	Person	at (<u>386_)</u>	lephone Number
		• • • • • • • • • • • • • • • • • • •	
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	4 \$30.00 Filing Fee &	□\$55.00 Filing Fee &	□\$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	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

13 OCT 18 AM 8:59

BETTYS PROWINDOW CO	LEANING WC SECRETARY)FSTAIL
(Name of the Limited Liability Compan (A Florida Limited Li	LEANING COC SECRETARY (ny as it now appears on our records) ALL AHASSER diability Company)	i, ri Uddur
The Articles of Organization for this Limited Liability Company Florida document number 406000 F6650		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
Bi-TTUS PRO CIZAJING SCAVIC The new name must be distinguishable and end with the words "Limit"L.L.C."	ted Liability Company," the designation "LLC" or the a	abbreviation
Enter new principal offices address, if applicable:	MAST Eastlake Dr	
(Principal office address MUST BE A STREET ADDRESS) .	Palm Coast, FL	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Me Some as Princ.	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		of the new
Name of New Registered Agent:	TYC MULHALL (SAME FASTLAKE DRIVE (SAME	<u>り</u>
New Registered Office Address: 52 &	ASTLAKE ORIVE (SAME Enter Florida street address)
Poin o	Cops T Florida ゾンパン Zip Code	7_
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.

Settly C Mulhace
If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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> <u>Name</u> Address Type of Action 57 EASI CALLE DRIVE Add BETTY C MULHELL PALM COASTFL 32137 Remove NICOLETTE J KRAEMER 1 FIELDING PLACE Add PALM COAST FL 32137 DRemove Remove

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	FEDEROL GIN Number 20-5529781
`	
Dated _	007 4 2013.
	Berly C Muchael
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

petty