

L07000012854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2013 AUG 13 PM 4:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan AUG 13 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Personalized 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:

Katherine Lefavor
Name of Person

Firm/Company

2301 SE Patio Circle
Address

Port St Lucie FL 34952
City/State and Zip Code

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

For further information concerning this matter, please call:

Katherine Lefavor at 772 985-2677
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)

Ref#
W13000042245

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 29, 2013

KATHERINE LEFAVOR
2301 SE PATIO CIRCLE
PORT ST. LUCIE, FL 34952

SUBJECT: ACCURATE TAX SOLUTIONS
Ref. Number: W13000042245

We have received your document for ACCURATE TAX SOLUTIONS and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Florida limited liability company cannot convert into another Florida limited liability company. Pursuant to s. 608.439(1), F.S., "the term 'other business entity' or 'another business entity' means a common law or business trust or association; a real estate investment trust; a general partnership, including a limited liability partnership; a limited partnership, including a limited liability limited partnership; or any other domestic or foreign entity that is organized under a governing law or other applicable law, provided such term shall not include a domestic limited liability company."

I am enclosing an Amendment form if you are wanting to change the name.

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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 513A00018208

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2013 AUG 13 PM 4: 34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Personalized 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 02/05/2007 and assigned Florida document number LD-7000012854

This amendment is submitted to amend the following:

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

Accurate Tax Solutions LLC

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)

2301 S.E. Patio Circle
Port St. Lucie, FL 34952

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:

Katherine Lefavor

New Registered Office Address:

Enter 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.

Katherine Lefavor
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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

Dated August 09, 2013

Katherine Lefavor
Signature of a member or authorized representative of a member

Katherine Lefavor
Typed or printed name of signee

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Filing Fee: \$25.00

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