L07000 035 695

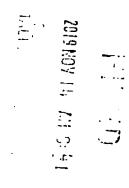
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(,	
(Cit	ty/State/Zip/Phone	#)
	<u> </u>	<u> </u>
☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
,	•	•
(0)		
(1)0	ocument Number)	
Certified Copies	_ Certificates	of Status
	ETT - OFF	· · · · · · · · · · · · · · · · · · ·
Special Instructions to	Filing Officer:	





100336777241

11/14/19--01065--016 **25.00



Y SUNKER

COVER LETTER

TO: Registration Secti Division of Corpo			
SUBJECT:	Colin Pember	ed Liability Company	<u> </u>
The enclosed Articles of An	nendment and fee(s) are subm	sitted for filing.	
Please return all correspond	ence concerning this matter to	the following:	
	(ol:n	Pember Name of Person	
	Centi	Firm/Company	ing LLC
	4		es Ln.
	Sarasda	FL 343 City/State and Zip Code	131 1200, Net
	Chery De E-mail address: (to	mbe/ & Ve/	1200, NET
For further information conc	erning this matter, please cal	1:	
Name of Pe	<u>Pember</u>	at (<u> </u>	504-7509 Daytime Telephone Number
Enclosed is a check for the f	ollowing amount:		
\$25.00 Filing Fee	□ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 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

Colin Pemb	er. L.L.C.				
	mpany as it now appears on our records.) ted Liability Company)	-			
(A Fronta Ellin	i 1 / 1	~ ~ ~			
The Articles of Organization for this Limited Liability Compa	any were filed on $\frac{9/9}{2}$	<i>30 </i>	_ and as	signed	
Florida document number	5695				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited l	iability company here:				
Centric Cleaning LLC The new name must be distinguishable and contain the words "Limited L.					
The new name must be distinguishable and contain the words "Limited L.	iability Company," the designation "LLC" o	or the abbre	viation "L	L.C."	
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)					
		,	2		
Enter new mailing address, if applicable:			<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)			8	<u> </u>	
				• •	
	·	;			
B. If amending the registered agent and/or registered		enter th	e name	of-the no	ew
registered agent and/or the new registered office address h	<u>here</u> :		ري	**************************************	
		:	' 4.		
Name of New Registered Agent:		<u></u>			
New Registered Office Address:					
	Enter Florida street address				
	, Flori	da			
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Membe

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
			□ Remove
			□ Change
			□ Remove
			Change
			Remove
			Change
			□ Remove
			Change
			Add
			☐ Remove
			☐ Remove
			Change

	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
_	
_	, , , , , , , , , , , , , , , , , , ,
_	
_	
_	
_	
_	
_	
_	
(If an effe Note: 1	re date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	November 11. 2019.
	Signature of a member or authorized representative of a member
	Colin Pember Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00