

L07000040030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700301047677

07/10/17--01031--028 \*\*25.00

FILED  
2017 JUL 10 PM 2:59  
SECURITY OF STATE  
TALLAHASSEE, FLORIDA

K SALY  
JUL 12 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: STRATEGic cleaning concepts  
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:

MELVIN GASKIN  
Name of Person

STRATEGic cleaning concepts  
Firm/Company

103 TROUT RIVER DR. SUITE 8#  
Address

JACKSONVILLE, FLORIDA 32208  
City/State and Zip Code

MELVINGASKIN57@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MELVIN GASKIN at ( 904 ) 566-7045  
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)

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

STRATEGIC CLEANING CONCEPTS

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2017 JUL 10 PM 2:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 4-13-2007 and assigned

Florida document number 207000040030  
207000040030

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

**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:

MELVIN GASKIN

New Registered Office Address:

103 TROUT RIVER DR. SUITE 8<sup>th</sup>

Enter Florida street address

JACKSONVILLE, FLA., Florida 32208

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.*

Melvin Gaskin

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 Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
OWNER	MELVIN GASKIN	103 TROUT RIVER DRIVE 8	<input checked="" type="checkbox"/> Add
		10859 NATALIE ASH DRIVE	<input checked="" type="checkbox"/> Remove
		JACKSONVILLE, FLA. 32218	<input type="checkbox"/> Change
<del>T/A</del>	SHANNON JERMYN		<input type="checkbox"/> Add
		10859 NATALIE ASH DRIVE	<input checked="" type="checkbox"/> Remove
		JACKSONVILLE, FLA. 32218	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
	SHANNON JERMYN		<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2017 JUL 10 PM 2:59  
ALLAHASST.FT ORTHO

FILED

2017 JUL 10 PM 2  
SECURITY OF STATE  
EMBASSY, FLORIDA

FILED  
2017 JUL 10 PM 2:59  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 7-6-17

Mehin Sarkin  
Signature of a member or authorized representative of a member

MEVIN GASKIN  
Typed or printed name of signer