L07000088479

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T. BROWN

COVER LETTER

TG Registration Section
Division of Corporations

Spectra Cleaning Solutions, L.L.C.

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:

Lisa Cleveland

Name of Person

Spectra Cleaning Solutions, L.L.C.

Firm/Company

2552 Tradewinds Trail

Address

Palm Harbor, FL 34683

City/State and Zip Code

spectra@spectracleaning.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Cleveland

_{...}727 **773-**0101

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fcc

□\$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

TALLAHASSEE OF STATE

r records.)

FILED

TALLAHASSEE OF STATE

ORIOA

8/20/2007

Spectra Cleaning Solutions, L.L.C.

(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 Lial	bility Company were filed on 0/23/	and assigned
Florida document number L07000088479	······································	
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company,"	'the designation "LLC" or the abbreviation
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	
,		
B. If amending the registered agent and/or registered agent and/or the new registered offi	~	records, enter the name of the new
Name of New Registered Agent:		
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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Lisa Cleveland	2552 Tradewinds Trail	Add
		Palm Harbor, FL 34683	Remove
MGRM	Jessica Cleveland	2552 Tradewinds Trail	Add
		Palm Harbor, FL 34683	Remove
			\[\] \[\Lambda\]
			Remove
			Add
			Remove
	- 		_ Add
			Add Remove

<u></u>	
Nover	nber 14th 2013
	Ma Call
	Signature of a member or authorized representative of a member
_	Teffrey Cleveland manager Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00