## L07000102874

*		
.» - (I	Requestor's Name)	
(,	Address)	
(,	Address)	<del>.</del>
(1)	City/State/Zip/Phone #	)
PICK-UP	☐ WAIT	MAIL
(I	Business Entity Name)	:
(I	Document Number)	
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DIVISION OF CORPORATIONS

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T. HAMPTON

JUN 3 0 2009

**EXAMINER** 

## **COVER LETTER**

Division of Co	rporations		
SUBJECT:	All 'Round Cle	aning Services, LLC	
•	Name of Limit	ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Ross F. Pavio	
	***	Name of Person	<del></del>
	All 'Rou	nd Cleaning Services, L	LC
		Firm/Company	
	32	11 11th Avenue North	
		Address	<del></del>
	St. Pete	rsburg, Florida 33713-5	403
	<u></u>	City/State and Zip Code	
	ett	orand9@hotmail.com o be used for future annual report n	· · · · · · · · · · · · · · · · · · ·
	•		ionneanon)
For further information	concerning this matter, please e	ull:	
R	oss F. Pavio	at (_727_)	321-0477
Name	of Person	Area Code & Day	time 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 enclo	\$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Registration Section

TO:

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

<ul> <li>All 'Round Cleanir</li> </ul>	ng Services	, LLC		
(Name of the Limited Liability Compa (A Florida Limited L	<mark>ny as it now app</mark> Jability Compan	ears on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on _	October 9th, 2007	_ and assi	gned
Florida document number L07000102874 .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company l	<u>here</u> :		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Cor	npany." the designation "LL	C" or the al	bbreviatio
Enter new principal offices address, if applicable:			8	SIVIC BSIVIC
(Principal office address MUST BE A STREET ADDRESS)	-		<u> </u>	
	<del></del>		29	
Enter new mailing address, if applicable:	<del> </del>		<b>⊋</b>	POF ST
(Muiling address MAY BE A POST OFFICE BOX)				TIONS
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		n our records, <u>enter the</u>	e name of	the nev
Name of New Registered Agent:		****		
New Registered Office Address:		Enter Florida street addre.	ss	
		. 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, 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>	Type of Ac	<u>tion</u>
MGRM	Ross F. Pavio	3211 11th Avenue North St. Petersburg, Elorida 33713-5403		
<del></del>			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
		Add . Remove		
D. If amend	ling any other information, ento	er change(s) here: (Attach additional sheets, if necessary.)	09 JUN 29 PM	SECRETARY O
  Dated	June 25th	$\frac{2009}{n}$ $\mathcal{D}$	_ 14 2: 29	F STATE PORATIONS
	Signature of	a member or authorized representative of a member  Ross F. Pavio (owner)  Typed or printed name of signee	<del></del>	

Page 2 of 2

Filing Fee: \$25.00