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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: A	to Z Maint (Name of Lim	CNANCE Repour +	Cleanuplic	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	,	
Please return all corresp	ondence concerning this matter	to the following:		
	_ Angela S	(Name of Person)		
	1 to 7 1	(Firm/Company)		
	14035 Su	(Address) FC. 32409 (City/State and Zip Code)		
	South por-	City/State and Zip Code)		
For further information	concerning this matter, please c	ail:		
Augela (Name	of Person)	at (<u>&D</u>) <u>\$90 - 24</u> (Area Code & Daytime	Telephone Number)	2008
Enclosed is a check for t	the following amount:		RETAR NHASS	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy, (additional copy is end	

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

A to Z Main (Name of the Limited (A	WTENGNEE REPORT Liability Company as it now apper Florida Limited Liability Company	ears on our records.	· LLC	
The Articles of Organization for this Limited Lia	ability Company were filed on _		and assign	ed
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability company h	ere:		
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Com	pany," the designation	"LLC" or the abb	eviation
B. If amending the registered agent and/o registered agent and/or the new registered off		our records, enter	r the name of t	<u>he new</u>
Name of New Registered Agent:	N/A		2008 JA SECRE TALLAF	***************************************
New Registered Office Address:		Enter Florida street o	address)	
	(City)	, Florida _	Zip Cöde)	
		•	Som I	

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> **Address Type of Action** Craig Grigsby MGR Remove Add Remove Add Remove ∏Add Remove Add Remove ∏Ađd Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00