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SECRETARY OF STATE

COVER LETTER

Division of Corporations						
SUBJECT: Mid-Bay Window Cleaning and Pressure Washing						
50002011		nited Liability Company)				
The enclosed Articles o	f Amendment and fee(s) are sub	bmitted for filing.				
Please return all correspondence concerning this matter to the following:						
riease return an corresp	iondence concerning this matter	to the following.				
	Manuel Cavazos	OI CD				
		(Name of Person)				
	Mid-Bay Window Wa	ashina				
		(Firm/Company)				
	440 Old D. (D.)					
	442 Olde Post Rd	(Address)	· · · · · · · · · · · · · · · · · · ·			
		(Addiess)				
	Niceville, FL 32578					
		(City/State and Zip Code)				
For further information	concerning this matter, please c	call:				
Manuel Cavazos		at (850) 803-2318				
	of Person)	(Area Code & Daytime Telephone Number)				
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	D6 (0.00 Fill = F			
\$23.00 T Hing I CC	Certificate of Status	Certified Copy	\$60.00 Filing Fee, Certificate of Status &			
		(additional copy is enclosed)	Certified Copy			
			(additional copy is enclosed)			

MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327

Registration Section

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

FILED

08 MAR -3 PM 12: 32

SECRETARY OF STATE TALLAHASSEE FLORIDA

Mid-Bay Window Cleaning and Pressure Washing, LLC

(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 Liabilit	ty Company were filed on Decem	ber 19, 2007 and assigned	
Florida document number <u>L07000126399</u>	·		
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company here:		
Mid-Bay Window Washing, LLC			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," (he designation "LLC" or the abbreviation	
B. If amending the registered agent and/or re registered agent and/or the new registered office a		ecords, <u>enter the name of the new</u>	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
	Florida		
	(City)	, Florida(Zip Code)	
New Registered Agent's Signature, if changing Regist	tered Agent:		
I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chang	r and complete performance of my d agent as provided for in Chapte tered office address, I hereby conj	v duties, and I am familiar with and r 608, F.S. Or, if this document is	
	(If Changing Registered Agent, <u>Si</u>	gnature 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 = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			AddRemove
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	ry.)
_ _ _			08 MAR -3 SECRETARY SECRETARY
Dated	W/		HAR -3 PM 12: 32 CRETARY OF STATE LAHASSEE FLORIDA
	manuer au	er of authorized representative of a member Va Zo S d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00