L0800008228

(Re	equestor's Name)	
(Ac	ldress)	<u>, , ,</u>
(Ac	Idress)	
(,	
(0)	10:11:17:10	40
(Ci	ty/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
`.		•
, (DC	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
· ·	g emeer.	
		:
<u> </u>		

Office Use Only



300136771223

10/14/08--01033--021 **30.00

OR OCT IL PHIZ: 15
SECRETARY OF STATE
TALLAHASSEE FLORIDA

D. BRUCE

OCT 15 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Clean Start All Around Cleaning, UC (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:	
Jacqueline Stuart (Name of Person)	
SE SE	
(Firm/Company)	
20020 NW 57+2 CH]:
(Address)	7
Miami, 71. 33015	;
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Vicareline Studet 1786 514-9435	
(Name of Person) at (86) 519-9935 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee	:d)

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

Clean Start	-ALL.	Around	Cleani	mille	\mathcal{E}
(Name of the Limited Li (A F	ability Company a orida Limited Liab	as it now appears on ility Company)	our records.)		
The Articles of Organization for this Limited Liab	ility Company we	ere filed on	23/08	and assig	ned
This amendment is submitted to amend the follow	ing:				
A. If amending name, <u>enter the new name of th</u>	<u>1e limited liabilit</u>	y company here:		08 SECT	
The new name must be distinguishable and end with t "L.L.C."	he words "Limited	Liability Company,"	the designation	1C" or Re ab	breviation
Enter new principal offices address, if applicab	le: _		<u>سڙ</u> س	왕 글 [<u></u>
(Principal office address MUST BE A STREET)	ADDRESS)		LOR	S Z)
	-		IDA	15	
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BO	<u>2X)</u>				······································
	_				
B. If amending the registered agent and/or registered agent and/or the new registered office		e address on our	records, enter t	the name of	the new
Name of New Registered Agent:	PULAY	1071	0190	<u> </u>	
New Registered Office Address:	<u> 20020</u>	NW5	The Florida street ad	Iduara)	
	MiAM	; 7L	r ioriaa sireet aa , Florida	330,	<u>u</u> _
	((City)		(Zip Code,)
New Registered Agent's Signature, if changing Re-	gistered 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)

MGR = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	Jacqueline Stuart Mario A. Pelaez	8611 NW 25 +25+ Sunise Fl. 33322	Add Remove
MGRN	Mario A. Pelaez	20020 NW57+2 CA	Add Remove
			Add Remove
.			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	FILED OR OCT 14 PM 12: 15
Dated	Signature of a member,	of authorized representative of a member Cline Stupped or printed name of signee	

• 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:

Page 2 of 2

Filing Fee: \$25.00