Florida Department of State

Division of Corporations
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To

Division of Corporations

Fax Number : (850)617-6383

Prom:

Account Name : CSH SERVICES, LLC

Account Number : 120070000160 Phone : (800)494-3124 Fax Number : (561)455-9885

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

AMZIL AND RAHIMI PRO- CLEANING AND PAINTING LLC

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Florida Dept of State

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April 10, 2008

FLORIDA DEPARTMENT OF STATE

AMZIL AND RAHIMI PRO- CLEANING AND PAINTING LLC 2567 J R STREET ORLANDO, FL 32839

SUBJECT: AMZIL AND RAHIMI PRO- CLEANING AND PAINTING LLC RRF: L08000010061

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and the correct articles of amendment form.

If you have any further questions concerning your document, please call (850) 245-6855.

Tammy Bampton FAX
Regulatory Specialist II Let
Registration/Qualification Section

FAX Aud. #: E08000091340 Letter Number: 408A00021171

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SECRETARY OF STATE
ALLAHASSEE, PLORIDA

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMZIL AND RAHIMI PRO- CLEANING AND PAINTING LLC

(Name of the Limited L (A F	lability Company as it now appears on our lorida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liab	oility Company were filed on <u>01/28/200</u>	8 and assigned
Florida document number <u>L08000010061</u>	· · · · · · · · · · · · · · · · · · ·	
This amendment is submitted to amend the follow	ring:	•
A. If amending name, enter the new name of t	he limited liability company here:	
ABSOLUTE PRO CLEANING LLC		
The new name must be distinguishable and end with the 'L.L.C."	the words "Limited Liability Company," the	designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
•	(Enter Flor	ida street address)
		, Florida
	(City)	(Zin 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)

Page 1 of 2

DIVISION OF CORPORATIONS

ON APR 10 AN 8: 35

If amendir or Managi	ig the Managers or Man ng Member being added	aging Members on our records, <u>enter the ti</u> or removed from our records:	tle, name, and address of each Manager H-080000 91340 3
MGR = M MGRM =	anager Managing Member		77 00000 11315 2
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
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· · · ·			Add Remove
<u>,</u>			
D. If amer	ading any other informat	tion, enter change(s) here: (Attach additional	0.
-			SECRETARY OF CORP
Dated Apr	il 10		AN 8: 35
	Sign Aomar Rahimi	ature of a member or authorized representative of a	a member
		Typed or printed name of signee	

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