

L080000051906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

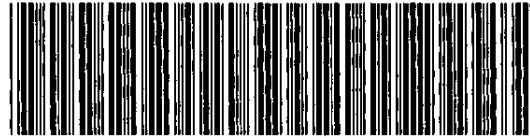
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/20/12--01041--020 **25.00

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12 SEP 12 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

MIAMI KWIK DRY, LLC

SUBJECT: _____
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:

CHESTER F. MULLIGAN

Name of Person

MIAMI KWIK DRY, LLC

Firm/Company

19301 SW 127th AVENUE

Address

MIAMI, FL 33177

City/State and Zip Code

KEESING@BELLSOUTH.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHESTER F. MULLIGAN

Name of Person

at (**305**)

992-5079

Area Code & Daytime 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 enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 21, 2012

CHESTER F. MULLIGAN
19301 SW 127TH AVENUE
MIAMI, FL 33177

SUBJECT: KWIK DRY TOTAL CLEANING, LLC
Ref. Number: W12000043524

We have received your document for KWIK DRY TOTAL CLEANING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 612A00021498

KWIK DRY TOTAL CLEANING, INC

19301 SW 127th AVENUE

MIAMI, FL 33177

September 5, 2012

FILED

12 SEP 12 PM 3:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
Corporate Filings
P. O. Box 6327
Tallahassee, FL 32314


Dear Sir/Madam:

Re: Affidavit for Non-Revocation of Voluntary Dissolution

I, the undersign, do declare that the Voluntary Dissolution of "KWIK DRY TOTAL CLEANING, INC." will not be revoked and the name be release forthwith and in accordance with the statutes of the State of Florida.

Thanks.

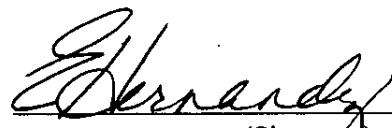
Sincerely,


Chester Mulligan, P/D

Subscribed and sworn before me, this 6th day of Sept, 2012, Elizabeth Hernandez, a Notary Public in and for Miami-Dade County, State of Florida.

RECEIVED
SEP 10 AM 9:48
DIV OF STATE
CORPORATIONS
TALLAHASSEE, FLORIDA




(Signature)
NOTARY PUBLIC

My Commission expires _____

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MIAMI KWIK DRY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED

12 SEP 12 PM 3:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on MAY 23, 2008 and assigned
Florida document number L08000051906.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

KWIK DRY TOTAL CLEANING, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

19301 SW 127th AVENUE

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33177

Enter new mailing address, if applicable:

19301 SW 127th AVENUE

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI, FL 33177

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

KEESING & ASSOCIATES, INC

New Registered Office Address:

9153 SW 206th STREET

Enter Florida street address

MIAMI

City

, Florida

33189

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>	<u>Type of Action</u>
MGR	SPENCER MULLIGAN	13235 SW 201 STREET MIAMI, FL 33177	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	CHESTER F. MULLIGAN	19301 SW 127th AVENUE MIAMI, FL 33177	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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 12 SEP 12 PM 3:08
 CLERK OF STATE
 TALLAHASSEE, FLORIDA

Dated AUGUST 15, 2012

 Signature of a member or authorized representative of a member
KEITHSON CHIN-SANG
 Typed or printed name of signee