## 18000008662

(Requestor's Name)		
(requestor a riality)		
(Address)		
, ,		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
: -		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
M89 707 671		

Office Use Only

LOB-68662



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2009 AUG 17 AM 9: 47
SECRETARY OF STATE
TALLAHASSEE, FI ORIDA

M. THOMAS

AUG - 6 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Your Clean Up! LLC (Name of Limited Liabili	ty Company)
The enclosed member, managing member or manager filing.	resignation and fee(s) are submitted for
Please return all correspondence concerning this matter	er to:
Monica Urrutia	
(Contact Person)	FCRE TI
Your Clean Up! LLC	ラニー
(Firm/Company)	TALLAHASSEE, FLORID
8104 Plantation Drive	10 A
(Address)	ALLE PARTY OF THE
Orlando, FL. 32810	
(City/State and Zip Code)	
For further information concerning this matter, please	call:
Christina Adame Diaz at ( 72	20 ) 275-2926
(Name of Contact Person) (Area	Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flor	rida Department of State for:  \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2009

MONICA URRUTIA YOUR CLEAN UP! LLC 8104 PLANTATION DRIVE ORLANDO, FL 32810

SUBJECT: YOUR CLEAN UP! LLC Ref. Number: L08000068662

We have received your document for YOUR CLEAN UP! LLC and your checker totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 509A00026913

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	Your Clean Up! LL0	<u>C</u>
2. (a) Principal office address of limited liability compan	y:	
(Note: MUST BE STREET ADDRESS)	8104 Plantation Drive Orlando, FL, 32810	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)		
07/14/2008	L\$8\$\$\$\$68	662
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida D	ept. of State:
Registered Agent:	Christina Adame Diaz	
Registered Office Address:	2632 Pembrook Drive	
	Orlando, FL. 32810	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office addre	<u> </u>
NEW Registered Agent:	Monica Urrutia	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8104 Plantation Drive	
	Orlando	,FL <u>32810</u>
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company	laws of the State of Florida, lorida street address of the rical. Or, in the case of a Flow was/were authorized by an rwise provided in the article y.	it is hereby registered office orida limited a affirmative vote s of organization
Signature of a member or authorized representative of a member	_	2009 SEI
Monica Urrutia Printed or typed name of signee	_	TICAHAS
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compand	ngree to act in this capacity. Oper and complete performa Sition as registered agent a Evely reflect a change in the Y has been notified in writin	The state of the s
Signature of Registered Agent		