# 108000018359

| equestor's Name)                        |   |  |  |  |
|---|---|--|--|--|
| (Address)                               |   |  |  |  |
| ldress)                                 |   |  |  |  |
| ty/State/Zip/Phon                       | e #)  |  |  |  |
| ☐ WAIT                                  | · MAIL  |  |  |  |
| (Business Entity Name)                  |   |  |  |  |
| (Document Number)                       |   |  |  |  |
| _ Certificates                          | s of Status   |  |  |  |
| Special Instructions to Filing Officer: |   |  |  |  |
|   |   |  |  |  |
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|   |   |  |  |  |
|   | Idress)  ty/State/Zip/Phone  WAIT  usiness Entity Narr  coument Number)  Certificates |  |  |  |

Office Use Only



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**EXAMINER** 

## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 27, 2009

ROBERT BUCHWALTER 7028 BENTON DR PANAMA CITY, FL 32404

SUBJECT: A & D QUALITY CLEANING LLC.

Ref. Number: L08000078359

We have received your document for A & D QUALITY CLEANING LLC. and check(s) totaling \$25.00. However, your check(s) and document are being returned for the following:

Please sign and return your check along with this document in order to complete your filing.

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

If you have any questions concerning the filing of your document, please as (850) 245-6020.

Tammi Cline Regulatory Specialist II ng of your document, please and long of

### **COVER LETTER**

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|   | v.     |  |

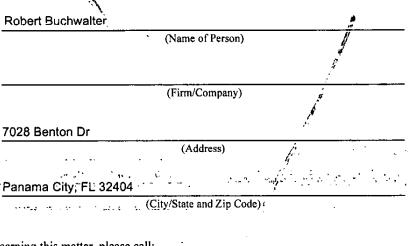
Registration Section
Division of Corporations

SUBJECT: A and D Quality Cleaning LLC.

(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:



For further information concerning this matter, please call:

Robert Buchwalter

at ( 850 ) 319-5189

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

्रा कर्या क्षेत्र । स्थापनार्थः । १८ वर्षः १८८० । स्थापनार्थः । स्थापनार्थः । १८ वर्षः १८८० ।

Commo Service Common Service

☑ \$25.00 Filing Fee

□\$30.00 Filing Fce & Certificate of Status Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fce, Certificate of Status & Certified Copy (additional copy is enclosed)

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### 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

| راي در   | ر او   | Charles Indian Service         |
|--|--|--------------------------------|
| A & D Quality Cleaning LLC.  | (च्याकृत चार्क्स (चेन १३४ व चार्कि) स्थापन ।<br>जन्म   |                                |
| (Name of the Limited Liabili   | ity Company as it now appears on our record<br>a Limited Liability Company)  | <u>ls.</u> )                   |
| •  |  |                                |
| The Articles of Organization for this Limited Liability  | Company were filed on 8/14/2008  | and assigned                   |
| Florida document number L08000078359   | <u></u> .  |                                |
| •  |  |                                |
| This amendment is submitted to amend the following:  |  |                                |
| A. If amending name, <u>enter the new name of the li</u>   | mited liability company here:  |                                |
| Pono Enterprises LLC.  |  |                                |
| The new name must be distinguishable and end with the w 'L.L.C."   | ords "Limited Liability Company," the designa  | tion "LLC" or the abbreviation |
|  |  |                                |
| Enter new principal offices address, if applicable:  | 7028 Benton Dr   |                                |
| (Principal office address MUST BE A STREET ADL   | Panama City, FL 32404  |                                |
| and the second s | The second secon | 55 3                           |
|  |  | SER 2                          |
| Enter new mailing address, if applicable:  | 7028 Benton Dr Alife and Jen   | 120 TA 3                       |
| Mailing address MAY BE A POST OFFICE BOX   | Panama City, FL 32404  | 9:                             |
|  |  |                                |
|  |  |                                |
| B. If amending the registered agent and/or reginered agent and/or the new registered office ad   |  | nter the name of the new       |
| registered agent and/or the new registered office ad   | idress here.   |                                |
| Name of New Registered Agent:  | en gran en   | •                              |
|  |  |                                |
| New Registered Office Address:   | (Enter Florida street address)   |                                |
| e de la companya de  | (Enter Fioriaa street aaaress)   |                                |
|  | , Flori<br>(City)  | da(Zip Code)                   |
|  | (City)   | (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.