(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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EXAMINER



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SECRETARY OF STAIL DIVISION OF CORPORATION

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: A to Z Janitorial Scruices, 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:
Gardenia Oraujo (Name of Person)
A to Z Santtonal Services, UC.
7601 E. TREasure Duve. Suite 1806 (Address)
N. Bay Village, FL 33141 (City/State and Zip Code)
For further information concerning this matter, please call:
Gardenia Oranjo at (305) 764-6090 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee & Certified Copy (additional copy is enclosed) 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

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

		VIII 011 011 110 11 110 11 110 11 110 110		
Articles of Organization for this Limited Liability	ility Company as it now appy da Limited Liability Company y Company were filed on		and as:	signed
rida document number <u>L 080009733</u>	<u> 20</u> .			
s amendment is submitted to amend the following	;;			
If amending name, enter the new name of the l	imited liability company h	<u>iere</u> :		
new name must be distinguishable and end with the v.C."	words "Limited Liability Com	npany," the designation "l	LLC" or the	abbreviat
ter new principal offices address, if applicable:				<u> </u>
incipal office address MUST BE A STREET AD	DRESS)			SE
			0	으움
			0	- 575 - 575
er new mailing address, if applicable:			<u></u>	97
<u>uiling address MAY BE A POST OFFICE BOX)</u>	<u> </u>		بب	<u>SSP 6,5</u> EA SAC
				<u> </u>
If amending the registered agent and/or registered agent and/or the new registered office a		our records, enter	the name	of the n
Name of New Registered Agent:	GARDENIA	A ARAUT	50	
New Registered Office Address:				
	((Enter Florida street ad	dress)	
<u></u> -	(City)	, Florida	(Zip Cod	dal

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

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 = Ma	anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	GARDENIA ARAUTO	4402 Delta St. unit 17 San Diego, CA 92113	Add Remove
MGRM	tabiane Charipo	7601 E. TREUSURE DR # 180 N. BAY VIllage, FL 33141	Add Remove
			Add Remove
			Add Remove
	 		Add Remove
	<u></u>		Add Remove
D. If amendi	Please change e company	e(s) here: (Attach additional sheets, if necessary. The PRESIDENT (OWY FROM: Forbiane Obia ARAUJO.	ner) OF ujo
Dated	FABIA	Consideration of a member ARAUTO or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00