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C. LEWIS

DEC 2 2 2009

EXAMINER

COVER LETTER

TO:

TO:	Registration Division of (n Section Corporations	
SUBJE	 Ст.	NAR JANITORIAL 8	R CLEANING SERVICES,LLC
SODJE	C1;		mited Liability Company
	•		
The end	losed Articles	of Amendment and fee(s) are s	ubmitted for filing.
Please r	eturn all corre	espondence concerning this matter	er to the following:
			ENVER VELEDAR Name of Person
		NAD IANITO	DIAL & OLEANING CEDVICES I.C.
		NAR JANITO	RIAL & CLEANING SERVICES,LLC Firm/Company
		0.70	
		8/0	O6 N ORANGE VIEW AVE Address
			TAMPA , FL 33617 City/State and Zip Code
		veledação	msn.com
	-	E-mail address:	: (to be used for future annual report notification)
For furt	her information	in concerning this matter, please	e call:
	ΕN	NVER VELEDAR	at (813) 899-2529
	Nan	ne of Person	Area Code & Daytime Telephone Number
Enclose	d is a check for	or the following amount:	
√] \$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Reg Div P.O	AILING ADDRESS: gistration Section ision of Corporations Box 6327 lahassee, 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

FILED

2009 DEC 21 PM 18 06

NAR JANITOI	RIAL & CLEANING SER\ Liability Company as it now appear Florida Limited Liability Company)	/ICES , LLC	CRETARY OF STATE
(<u>Name of the Limited</u> (A	Liability Company as it now appear Florida Limited Liability Company)	rs on our records.	LAHASSEE FLORIDA
The Articles of Organization for this Limited L		11/25/2008	and assigned
Florida document number L08000109	<u> </u>		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liability company her	<u>e</u> :	
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
		- <u></u> -	
Enter new mailing address, if applicable:		- <u>-</u>	
(Mailing address MAY BE A POST OFFICE)	BOX)		
			
·B. If amending the registered agent and/		our records, <u>enter t</u>	he name of the new
registered agent and/or the new registered of	fice address here:		
Name of New Registered Agent:	ADNAN VELEDAR		
New Registered Office Address:	8706 N ORANGE VIEW		
	Enter Florida street address		
	TAMPA	, Florida	33617
	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.

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>	Address	Type of Action
MGRM	ENVER VELEDAR	8706 N ORANGE VIEW TAMPA_FL33617	AddRemove
MGRM	ADNAN VELEDAR	8706 N ORANGE VIEW TAMPA_FL33617	✓ Add Remove
			AddRemove
			AddRemove
•			AddRemove
			AddRemove
D. If ame	ending any other information, e	nter change(s) here: (Attach additional sheets, if n	necessary.)
-	THE ONLY CHANGE IS RE	EMOVING ENVER VELEDAR AS MGRM.	
<u>.</u> -	ADDING ADNAN VELEDA	R AS MGRM.	
-			-9'
Dated	DECEMBER 15		F 11 2019 DEC:
	Signature of	of a member or authorized representative of a member	<u>02 10</u>
		ADNAD VELEDAR Typed or printed name of signee	SET OF THE PROPERTY OF THE PRO
		Page 2 of 2	STATE LORIE
		Filing Fee: \$25.00	7