

LO 90000 26880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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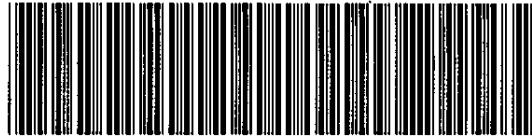
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

M. THOMAS

MAY - 8 2009

EXAMINER

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Houston Mobile Dry Cleaning Service, 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:

Reginald Houston

(Name of Person)

Houston Mobile Dry Cleaning Service, LLC

(Firm/Company)

P.O. Box 442035

(Address)

Jacksonville, FL 32222

(City/State and Zip Code)

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For further information concerning this matter, please call:

Reginald Houston

(Name of Person)

at ( 1 )

904-402-9134 / 904-314-6713  
(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

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

Houston Mobile DryCleaning Service,LLC

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

The Articles of Organization for this Limited Liability Company were filed on April 1, 2009 and assigned  
Florida document number L09000026880.

This amendment is submitted to amend the following:

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

Houston On-Site Dry Clean, 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:

(Principal office address MUST BE A STREET ADDRESS)

4336 BethWood, Cir

Jacksonville, FL 32205

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 442035

Jacksonville, FL 32222

**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: Reginald Houston

New Registered Office Address: 4336 BethWood, Cir

(Enter Florida street address)

Jacksonville, Florida 32205

(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)

**MGR = Manager**  
**MGRM = Managing Member**

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

Dated May 6, 2009

Signature of a member or authorized representative of a member

Typed or printed name of signee

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