

LD9000053844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2015 MAY 27 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan MAY 28 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2015

ELEONORA WALKER
2607 PARMA STREET
SARASOTA, FL 34231

SUBJECT: E-LO SERVICES LLC.
Ref. Number: L09000053844

We have received your document for E-LO SERVICES LLC. and your check(s) totaling \$52.50. 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) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 615A00008372

RECEIVED

15 MAY 27 PM 4:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E-LO SERVICES 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:

EUDNOR WALKER
Name of Person
E-LO SERVICES LLC
Firm/Company
2607 PARMA ST
Address
SARASOTA FL 34231
City/State and Zip Code
EWALKER@E-LOCLEANING.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EUDNOR WALKER at (941) 587-1706
Name of Person 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

HAVE BEEN SUBMITTED!

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2015 MAY 27 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E-Lo Services 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 7/13/2009 and assigned
Florida document number L09000053844.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

CAROL FINDLAY

New Registered Office Address:

2607 PARNAS

Enter Florida street address

SARASOTA

City

Florida

34231

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 605, 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.

X Carol Findlay

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

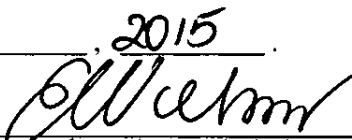
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CARLOS PEREZ	1050 VILLAGIO CIR	<input type="checkbox"/> Add
		UNIT 105	<input checked="" type="checkbox"/> Remove
		SARASOTA FL 34237	
MGR	CAROL FINDLAY	2607 PARNER ST	<input checked="" type="checkbox"/> Add
		SARASOTA FL 34231	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 5.5, 2015



Signature of a member or authorized representative of a member

Eleonora Walker

Typed or printed name of signer

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2015 MAY 27 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA