L09000087595

(Requestor's Name)				
(Address)				
(Address)				
(Addiesa)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				



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SECRETARY OF STATE
AND ANASSEE, FLORED.

Office Use Only

COVER LETTER

TO: Registration Division of C	Section Corporations		•			
SUBJECT:	BJECT: ECO-CLEANING SOLUTIONS, LLC					
	Name of Lin	ited Liability Company				
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.				
Please return all corres	pondence concerning this matte	r to the following:				
	JOHN KUBINEC					
	Name of Person					
	PINNACLE COMPUTATION, INC.					
	Firm/Company					
	2641 E. ATLANTIC BLVD, SUITE 202					
	Address					
	POMPANO BEACH, FL 33062					
	City/State and Zip Code					
	JKUB@GATE.NET E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please	•	,			
JC	OHN KUBINEC	at (954)	933-2893			
Name	of Person	at (954) 933-2893 Area Code & Daytime Telephone Number				
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 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

FILED

11 NOV -4 PH 1:22

SECRETARY OF STATE

TALLAHASSEE STATE

Zip Code

ECO-CLEANING S	OLUTIONS, L	LC TALLAL	ASSEE, FLORIDA
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears iability Company)	on our records.)	LONIDA
The Articles of Organization for this Limited Liability Company	were filed on	9/10/2009	and assigned
Florida document numberL09000087595			
•			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
JS CONSULTING	•		
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company	," the designation "L	LC" or the abbreviation
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 offi registered agent and/or the new registered office address here	ice address on our	r records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter	Florida street addr	ess
		. Florida	

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.

City

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 Title Name <u>Address</u> **Type of Action** MGR MICHAEL FURLONG 111 BRINY AVE. #PH7 ☐ Add
✓ Remove POMPANO BEACH FL 33062 ☐ Add Remove ☐ Add Remove Remove \square Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated OCTOBER 315T 2011 Signature of member or authorized representative of a member REGIÑA FURLONG Typed or printed name of signee

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Filing Fee: \$25.00