

LD9 000107346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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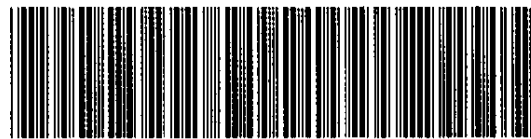
(Business Entity Name)

(Document Number)

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2010 JUL 19 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

JUL 20 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Freedom Cleaners, 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:

Kristin Baker

Name of Person

Freedom Cleaners, LLC

Firm/Company

15390 Remora Drive

Address

Bonita Springs, FL 34135

City/State and Zip Code

KBaker.Freedomcleaners@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristin Baker

Name of Person

at (239)

682-5593

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 JUL 19 AM 11:05

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

Freedom Cleaners 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 November 6, 2009 and assigned
Florida document number L09000107346.

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)

15390 Remora Drive

Bonita Springs, FL 34135

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15390 Remora Drive

Bonita Springs, FL 34135

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2009 JUL 19 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Kristin Baker

New Registered Office Address:

15390 Remora Drive

Enter Florida street address

Bonita Springs

, Florida

34135

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.

Kristin B. Baker
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 | Address | Type of Action |
|-------|---------------|--|--|
| MGRM | Kristin Baker | 15390 Remora Drive Bonita Springs, FL 34135 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| MGRM | Brandon Baker | 15390 Remora Drive Bonita Springs, FL 34135 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

Dated July 14, 2010

Michelle Baker
 Signature of a member or authorized representative of a member

Michelle Baker
 Typed or printed name of signee

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 28 JUL 19 AM 11:05
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA