L09000108368

(Re	questor's Name)	
· (Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
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T. HAMPTON

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EXAMINER

COVER LETTER

TO:

TO:	Registration S Division of Co						
SUBJE	ст. А	TO Z PROFESSION	AL CLEANING SERVICE LLC				
SOLGE	Name of Limited Liability Company						
The enc	losed Articles o	of Amendment and fee(s) are sub	omitted for filing.				
Please r	eturn all corres	pondence concerning this matter	to the following:				
		FRA	FRANCISQUE PAULEMON				
			Name of Person				
			MGRM				
	Firm/Company						
	3498 MELISSA CT						
	Address						
	PORT CHARLOTTE, FL 33980						
			City/State and Zip Code				
		INFO@WEST	COASTTRANSPORTATION.COM to be used for future annual report notification)				
For fur	ther information	n concerning this matter, please					
····		ISQUE PAULEMON	at ()941 391 5664				
	Name	e of Person	Area Code & Daytime Telephone Number				
Enclose	ed is a check fo	r the following amount:					
 √ \$25	.00 Filing Fee	Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
	Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A TO Z PROFESSIONAL C	CLEANING SE	ERVICE LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Company Florida document numberL09000108368	were filed on	11/10/2009	and assign	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company her	g:		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Compa	ny," the designation "LL	C" or the abbi	reviation
Enter new principal offices address, if applicable:	N/A		09 †	SEC
(Principal office address MUST BE A STREET ADDRESS)			NON	7. A
			20	0.4
Enter new mailing address, if applicable:	N/A		A	OF ST
(Mailing address MAY BE A POST OFFICE BOX)			73	
·····				SK
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address:		ur records, <u>enter the</u>	e name of t	he new
	Ent	er Florida street addre	.ss	

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

Zip Code

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** <u>Name</u> <u>Address</u> Type of Action MGR BERTRAND PAULEMON 1112 PHILIP CT ☐ Add VALLEY STREAM, NY 11580 √ Remove BRYAN FABRICE PAULE MGR 19 CHARLES ST √
Add Bryan Fassic PAulemon Remove VALLEY STREAM, NY 11580 ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A 11/17/2009 Dated _ Signature of a member of authorized representative of a member FRANCISQUE PAULEMON Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00