

LOG 000115868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

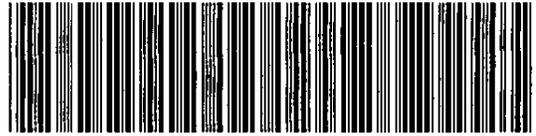
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

LOG-115868



300163932143

12/29/09--01012--014 **25.00

2009 DEC 29 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

M. THOMAS

DEC 30 2009

EXAMINER

COVER LETTER

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

SUBJECT: AAA PRESSURE CLEANING 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:

MATTHEW S. MILLER
Name of Person

AAA PRESSURE CLEANING
Firm/Company

181 SW 76TH TERRACE
Address

MARGATE FL. 33068
City/State and Zip Code

aaa.pc.10@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MATT MILLER at (954) 821-3954
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

2009 DEC 29 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

AAA PRESSURE CLEANING 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 DECEMBER 7, 2009 and assigned Florida document number LOG000115868.

This amendment is submitted to amend the following:

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

AAA PRESSURE CLEANING 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)

181 SW 76TH TERRACE
MARGATE FL. 33068

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

181 SW 76TH TERRACE
MARGATE FL. 33068

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:

MATTHEW S. MILLER

New Registered Office Address:

181 SW 76TH TERRACE
Enter Florida street address

MARGATE, Florida 33068
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.

Matthew B Miller
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MATTHEW S. MILLER	181 SW 76 TH TERRACE MARGATE FL. 33068	<input checked="" type="checkbox"/> Add <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
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

2015 OCT 29 AM 10:35
 FILED
 SECRETARY OF FLORIDA
 TALLAHASSEE

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

Dated _____, _____.

Matthew S. Miller

Signature of a member or authorized representative of a member

MATTHEW S. MILLER

Typed or printed name of signee