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SECRETARY OF STATE.

OIVISION OF CORPORATION

T. HAMPTON

MAR 1 6 2010

EXAMINED

COVER LETTER

	tration Section on of Corporations
SUBJECT: _	Name of Limited Liability Company
The enclosed A	Articles of Amendment and fee(s) are submitted for filing.
Please return a	Il correspondence concerning this matter to the following:
	Oscar Rey
	Name of Person USCAR REY CPA Firm/Company
	1400 LINCOLN RD TE 504
	HIAMI BENCH, PZ 33/39. City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further info	ormation concerning this matter, please call:
	at ()
	Name of Person Area Code & Daytime Telephone Number
Enclosed is a c	heck for the following amount:
□ \$25.00 Filii	

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



RECEIVED

10 MAR 15 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 8, 2010

OSCAR REY, CPA 1400 LINCOLN RD # 504 MIAMI BEACH, FL 33139

SUBJECT: LUCKY'S CLEANING LLC

Ref. Number: L10000002550

We have received your document for LUCKY'S CLEANING LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 110A00005687

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUCKY'S CLEANIA	NG LL	.C.		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	iv as it now app	ears on our records.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L1000000 2550</u>	were filed on _	01/07/2010	and assign	ıed
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liab</u> i	ility company l	<u>ıere</u> :		
			W. C	
The new name must be distinguishable and end with the words "Limit" L.L.C."	ted Liability Con	npany," the designation	"LLC" or the abb	reviation
Enter new principal offices address, if applicable:	9167	FOUNTAIN	EBLEAU	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	STR	12		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MAN	11, FL 3;	3/92 10 MAR 15 AM	SECRETARY OF CORP
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address or	n our records, <u>enter</u>	the name of t	ORANGONS
Name of New Registered Agent:				
New Registered Office Address:		Enter Florida street aa	ldress	
		, Florida		
	City	, riorida _	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.

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>	Address	Type of Action
MGRM	IGNACIO A COLATI	MIAMI, P. 33172	Add Remove
MGR	HECTOR M ROSA	LES 1717 N BAYSHORE DR APT 1255 MIANI, PC 33132	Add Remove
			Add Remove
			Add Remove
	<u> </u>		Add Remove
			Add Remove
D. If amen	nding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	
			PILED BILED OR PILED ON OF CORPORATE AN
_	2/12		ORATIONS
Dated	Bulad	r or authorized representative of a member	. <i></i>
	16NACiC Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00