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(Requestor's Name)				
(Address)				
(Address)·				
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PICK-UP WAIT MAIL				
· (Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				
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03/14/11--01062--006 **25.00



N. CAUSSEAUX
APR 2 5 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: De Tough Chick Cleaning Services 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:					
Morma Bavis Korcyznski Name of Person					
One Tough Chick Cleaning Services					
113 Haritage Way					
West Ralm Och, Fl 33407 City/State and Zip Code					
Davis Value 201 & yahoo. Com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Name of Person at 801 7199242 Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$\$\$\$\$\$ Certified Copy \\ \text{(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

One Tough Chi	ick Cleaning	Secure	3	
(Name of the Limited	Liability Company as it no Florida Limited Liability C	ow appears on our recompany)	ords.)	
·	•	,		
The Articles of Organization for this Limited L	iability Company were file	ed on <u>11-12-</u> 2	O \ O and assigned	
Florida document number 29-394000	۹D .		>	
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liability com	pany here:		
Raide Cleaning S	20,000	1 C		
Raide Cleaning Se The new name must be distinguishable and end with	th the words "Limited Liabil	ity Company," the design	gnation "LLC" or the abbreviation	
"L.L.C."				
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE	T ADDRESS)			
			,	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BOX)		•	
· · · · · · · · · · · · · · · · · · ·				
·			, , , , , , , , , , , , , , , , , , , 	
B. If amending the registered agent and/	or registered office add	ress on our records,	enter the name of the new	
registered agent and/or the new registered of	ffice address here:			
		· ·	,	
Name of New Registered Agent:	10rma	Davis	Korczynski	
New Registered Office Address:	same.		,	
new registered Office Address.		Enter Florida s	treet address	
	77			
	City	, Flo	orida 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.

Page 1 of 2

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> **Address** Type of Action Name Remove ☐ Add ☐ Remove Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated . Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00