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SECRETARY OF STATE

J. BRYAN

JUL -5 2011

EXAMINER

COVER LETTER

TO:

SUBJEC	CT:	New Day Cle	. 0		
			eaning Service, LLC	•	
		Name of Limi	ted Liability Company		≯ ;
				P.	5 T
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	į	翌して
Please re	eturn all correspo	ondence concerning this matter	to the following:		SERVICE BY
			Patrice Robinson		TILL PH 2: 26
			Name of Person		<u>P</u> C
New I		Day Cleaning Service, I	LC.		
			Firm/Company		
195		7 Opa-Locka Boulevar	rd		
			Address		
			Opa-Locka, FL 33054		
			City/State and Zip Code		
		NewDa E-mail address: (ayCleaning@Bellsouth to be used for future annual repor	.net 1 notification)	
For furth	er information of	concerning this matter, please of			
	Pati	rice Robinson	at (305)	648-6222	
Name of Person		Area Code & D	Paytime Telephone Number		
Enclosed	d is a check for t	he following amount:			
\$25. 0	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end		Status &
	Registi Divisio	ING ADDRESS: ration Section on of Corporations lox 6327	STREET/CO Registration : Division of C Clifton Build	Corporations	

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

TILED RY 2:26 **OF** New Day Cleaning Service, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(Playida Limited Liability Company)

(-	Tronga Bameu Baarney Company,		Dr.
The Articles of Organization for this Limited L	iability Company were filed on	February 08, 2011	and assigned
Florida document numberL1100001	6221		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability company he	ere:	
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	ET ADDRESS)		

Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/ registered agent and/or the new registered o		our records, enter th	he name of the new
Name of New Registered Agent:	Patrice Robinson		
New Registered Office Address:	1957 Opa-Locka Bouleva	^r d	-
	E	nter Florida street addr	ess
	Opa-Locka	, Florida	33054
	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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	<u>Address</u>	Type of Action
MGRM	Judith Thompson	7817 Alhambra Blvd Miramar, FL 33023	Add ✓ Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
			Add Remove
	<u></u>		Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necessa	
			TI JUL -1
	June 20	2011	PH 2:26
Dated	, /	Doluison_	
	Signature of a	nember or authorized representative of a member Patrice Robinson	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00