## L11000050891

(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:					
L. SELLERS					
SEP -7 2011					

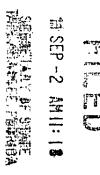
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**EXAMINER** 



000211045670

09/02/11--01011--010 \*\*25.00



## **COVER LETTER**

TO:	Registration Division of C					
SUBJECT: EXPERT CLEANING GROUP, LLC						
Name of Limited Liability Company						
The en	closed Articles	of Amendment and fee(s) are su	abmitted for filing.			
Please	return all corres	spondence concerning this matte	er to the following:			
			DIXIA E. MARTINEZ			
Name of Person						
EXPER			RT CLEANING GROUP, LLC			
Firm/Company						
409			098 NAVIGATOR WAY			
Address						
	KISSIMMEE, FL 34746					
	City/State and Zip Code					
	joser@martinezpaintgroup.com  E-mail address: (to be used for future annual report notification)					
For fur	ther information	n concerning this matter, please	•			
	עוא	IA E. MARTINEZ	at ( 321 ) 624-0340			
		e of Person	at ( 321 ) 624-0340  Area Code & Daytime Telephone Number			
Enclos	ed is a check fo	r the following amount:				
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certificate of Status & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		stration Section sion of Corporations Box 6327	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**

EXPERT CLEANING GROUP, 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 L		4-29-2011	and assigned				
Florida document number L1100005							
This amendment is submitted to amend the following	lowing:						
A. If amending name, enter the new name of	of the limited liability company here	<u>e</u> :	,				
The new name must be distinguishable and end wi "L.L.C."	ith the words "Limited Liability Compa	ny," the designation "	'LLC" or the abbreviation				
Enter new principal offices address, if applie	cable:						
(Principal office address MUST BE A STREET 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 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:	DIXIA E. MARTINEZ						
New Registered Office Address:	1105 EMMETT STREET						
	Ent	er Florida street add	dress N				
	KISSIMMEE	, Florida	34741				
	City		Zip Code				
New Registered Agent's Signature, if changing Registered Agent:							
I hereby accept the appointment as registere the provisions of all statutes relative to the p accept the obligations of my position as regi being filed to merely reflect a change in the company has been notified in writing of this	proper and complete performance of istered agent as provided for in Ch registered office address, I he <u>reby</u>	of my duties, and I apter 608, F.S. Or, canfirm that the li	am familiar with and , if this document is mited liability				

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 **Type of Action** Title **Name Address** MGRM JOSE R. MELENDEZ **4098 NAVIGATOR WAY** ✓ Add KISSIMMEE, FL 34746 Remove ✓ Add ☐ Remove ☐ Add Remove ∏Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 29 2011 Dated a member or authorized representative of a member JOSE R. MELENDEZ Typed or printed name of signee

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Filing Fee: \$25.00