

U11 0000 60809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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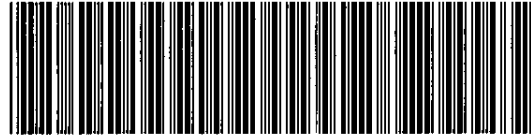
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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T. CLINE  
DEC 28 2011  
EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: INDEPENDENT DETAILED CLEANING SERVICES, 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:

Favernise Duprevil

Name of Person

INDEPENDENT DETAILED CLEANING SERVICES, LLC

Firm/Company

8180 NW 36TH STREET #302

Address

DORAL FL 33166

City/State and Zip Code

CleanPlaceNow@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Favernise Duprevil

Name of Person

at ( 954 )

324-7751

Area Code & Daytime Telephone Number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

→ ☒ \$25.00 Filing Fee  
yes

→ ☒ ~~\$20.00 Filing Fee &~~  
no 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

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

**INDEPENDENT DETAILED CLEANING SERVICES, 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 5/24/2011 and assigned  
Florida document number L11000060809.

This amendment is submitted to amend the following:

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

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)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

P.O. Box 669119  
POMPANO BEACH FL  
33066-9114

**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:

New Registered Office Address:

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_  
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**

**MGR = Manager**  
**MGRM = Managing Member**

MGR PRISCILLA F. DELEON 8180 NW 36th ST  
#302 DORAL FL. 33156 ☐ Add ☒ Remove

\_\_\_\_\_ ☐ Add  
 \_\_\_\_\_ ☐ Remove

\_\_\_\_\_ ☐ Add  
 \_\_\_\_\_ ☐ Remove

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Add  
Remove  
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CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA  
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