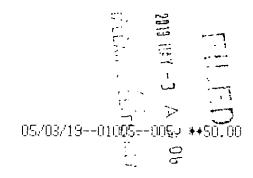
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DIVISION OF COMPORATIONS
TALLANASSEE FI ORIDA

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COVER LETTER

TO:		ation Sect n of Corpo				,		
Crus sa		leritage C	leaning of Tallahassee LLC					
SHRJI			Name of Lim	nited Liability Company				
The en	closed Ar	ticles of A	mendment and fee(s) are sub	mitted for filing.				
Please	return all	correspon	dence concerning this matter	to the following:				
			Christy Peltier					
				Name of Person				
			Heritage Cleaning of Talla	hassee LLC				
				Firm/Company				
			1012 Crossing Brookway			.	673 673	
				Address		 -,	<u></u>	
			Tallahassee FL 32311			; ;	1	
			heritagecleaningoftallahasse	City/State and Zip Code ee@gmail.com			> ;	·
			E-mail address: (to be used for future annual re	eport notification)		Э	
For fur	ther infor	mation cor	scerning this matter, please ca	all:		7.	o ⁻	
Christy	Peltier				-8609			
		Name of I	Person	at () Area Code	Daytime Telephone N	umber	-	
Enclose	ed is a che	eck for the	following amount:					
\$2:	5.00 Filin _i	g Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encle	Cer osed) Cer	00 Filing Fortificate of Statified Copy litional copy is	tatus &	

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

Heritage Cleaning of Tallahassee 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 $\frac{07/05/2011}{1}$ _____ and assigned Florida document number L11000076854 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 contain 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) 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

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Name</u>	Address	Type of Action
Marcus Miller	1012 Crossing Brookway	
		Add
	Tallahassee FL 32311	
		■ Remove
		Change
Willie Lugune	1012 Crossing Brookway	Change
	Tallahassee FL 32311	
		□ Remove
		☐ Change
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		 ල ේ
		☐ Change
		Remove
		Remove
		Change
		☐ Add
		Remove
		Change
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		Marcus Miller Tallahassee FL 32311 Willie Lugune 1012 Crossing Brookway

					
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ective date, if other than to effective date is listed, the date	the date of filing:	orior to date of filing	or more than 90 days	optional) after filme	.) Pursuant to 605.
te: If the date inserted in this current's effective date on the	s block does not meet the ap	plicable statutory	filing requirements	, this date	will not be liste
record specifies a delay The 90th day after the r		not an effectiv	ve time, at 12:	01 a.m.	on the earlie
May I	2019	·			
	lis last				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00