111000106424

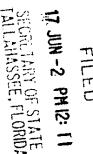
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



600299832146

06/02/17--01003--028 **25.00



S. WARREN JUN 0 5 2017

COVER LETTER

TO:	Registration Se Division of Cor			
	a curo		ANING SERVICES LLC	
SOBJE	ECT:		ited Liability Company	
The en	closed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
			GUIMS CARRIE	
			Name of Person	
		GCN	MC CLEANING SERVICES LLC	
			Firm/Company	
		127	7 NW 13TH STREET STE 14	
			Address	
		I	BOCA RATON FL 33432	
			City/State and Zip Code	
			ARRIE509@GMAIL.COM	
			to be used for future annual report notifi	cation)
For fur	ther information c	oncerning this matter, please c	all:	
GUIM	IS CARRIE		561 4145368	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & 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

ERVICES LLC	
pany as it now appears on our records. Liability Company)	
y were filed on	and assigned
bility company here:	
oility Company," the designation "LLC"	or the abbreviation "L.L.C."
office address on our records, ere:	
ere:	
Enter Florida street address	ida
ere:	
Enter Florida street address	ida
1	ny were filed on 09/16/2011 Ability company here: bility Company," the designation "LLC" of

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

AMDK - Aut	horized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			□ Remove
			Change
			🗆 Add
			🗆 Remove
			Change
			Add
			Remove
		T.CO	-2 -2 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -

,				
-	i			
				<u> </u>
			,	
	·-	·		·
	.			
		•		

-				
	· · ·			
			<u> </u>	
		· ·		
			(-	4:al\
ffective date, if other than an effective date is listed, the date	must be specific and	cannot be prior to date of	f filing or more than 90 days.	after filing.) Pursuant to 605.020
ote: If the date inserted in the beament's effective date on the			utory filing requirements.	, this date will not be listed a
seament verteenve date on a	io is eparement or is:	are in records		
record specifies a dela	ved effective d	ate, but not an ef	fective time, at 12:0)1 a.m. on the earlier (
The 90th day after the	record is filed.		, 	
ated MAY 18	,	2017		
	^ •	116		
	Coul			
	Signature of a n	nember or authorized rep	presentative of a member	507
		GUIMS CARRI	E	
		Typed or printed name of	of signee	V-2 PM
				ے میں ا

Filing Fee: \$25.00