

L 11000136831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

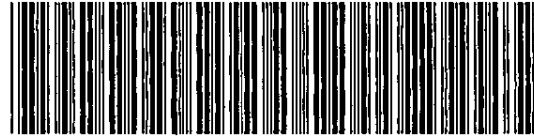
(Business Entity Name)

(Document Number)

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13 AUG 23 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08/23/13--01024--007 **25.00

K. SALY
EXAMINER
AUG 26 2013

COVER LETTER

MY NAME IS MARIA C. OCHOA, MY CONTACT INFORMATION IS 678-687-4954 AND MY ADDRESS IS 8405 LONG BAY, WEST PALM BEACH, FL 33411

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Star Cleaning Team
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:

Mario C. Ochoa
Name of Person

Star Cleaning Team
Firm/Company

8405 Long Bay
Address

West Palm Beach
City/State and Zip Code

starcleaningteam@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mario Ochoa at (678) 687 4954
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
13 AUG 23 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Star Cleaning Team
(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 11/20/11 and assigned
Florida document number L11000136831.

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)

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

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Anita Gutierrez	1100 Duncon Circle	<input type="checkbox"/> Add
		suite 102, Palm Beach Gardens	<input checked="" type="checkbox"/> Remove
		Fl, 33418	
mgrm	Mario Londono	802 windward way # 103	<input type="checkbox"/> Add
		Lantana, Fl 33462	<input checked="" type="checkbox"/> Remove
MGR	Gloria Morenstein	18224 Clear Brook circle	<input checked="" type="checkbox"/> Add
		Boca Raton, Fl 33498	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated August 19, 2013.

Carolina Ochoa

Signature of a member or authorized representative of a member

Maria C. Ochoa

Typed or printed name of signee

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Filing Fee: \$25.00