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K. SALY EXAMINER AUG 1 4 2013

### **COVER LETTER**

TO: Registration Section
Division of Corporations

DENIS & ALIS CLEANING SERVICE LLC

SUBJECT:

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:

## **DENIS A RODRIGUEZ**

Name of Person

Firm/Company

## 619 COLONIAL DRIVE APT 8

Address

# FORT WALTON BEACH, FL 32547

City/State and Zip Code

## INFO@RUDISRODRIGUEZ.COM

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

For further information concerning this matter, please call:

## RUDIS RODRIGUEZ

516, 4508716

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 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

FILED .13 AUG 12 PM 1: 30 SEURETART OF STATE TALLAHASSEE, FLORIDA

#### **DENIS & ALIS 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 Liab	oility Company	were filed on 02/06/2	012 and assigned
Florida document number L12000003109	<u> </u>		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liab	ility company here:	
D & N CONSTRUCTION SERVICES L	LC		, , , , , , , , , , , , , , , , , , ,
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," t	ne designation "LLC" or the abbreviation
Enter new principal offices address, if applical	ole:	619 COLONIAL [	DRIVE
(Principal office address MUST BE A STREET	ADDRESS)	APT 08	
		FORT WALTON BEACH, FL 32547	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		619 COLONIAL DRIVE	
		APT 08	
		FORT WALTON	BEACH, FL 32547
B. If amending the registered agent and/or registered agent and/or the new registered offi	ce address her	<u>e</u> :	ecords, enter the name of the new
Name of New Registered Agent:	DENIS A R	ODRIGUEZ	
New Registered Office Address:     619 COLONIAL DRIVE APT 08			8
	Enter Florida street address		
	FORT WAL	TON BEACH	, Florida <u>32547</u>
	· · · · · · · · · · · · · · · · · · ·	City	Zip Code
New Registered Agent's Signature, if changing Re	gistered 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			Add	
			Remove	
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			Add	
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). If ai	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ated,	August 09 . 2013.  Denis Bodrigus  Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	DENIS A RODRIGUEZ
	Typed or printed name of signee
	Page 2 of 2

Page 3 of 3

Filing Fee: \$25.00