L/2000022014

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
MAY 1 6 2011
EXAMINER

Office Use Only



500234276235

05/14/12--01008--008 **25.00

2912 HAY IL SH 39 10

COVER LETTER

TO:

TO:	Registration S Division of Co						
SUBJE	CT:	Supreme	Pro Clean LLC				
2020			ted Liability Company				
The enc	closed Articles of	f Amendment and fee(s) are sub	omitted for filing.				
Please r	return all corresp	ondence concerning this matter	to the following:				
		Rodolfo Lopez					
			Name of Person				
	S & J Square LLC				~- - 1	NO.	
	Firm/Company					7	
719 Palmway St.				产品	TI NYH BIOZ		
			Address		38.5	Ŧ	
Kissimmee Fl. 34744					("T")	- TO	II
			City/State and Zip Code		IF STAIL.	(<u>)</u>)	ķ
		F-mail address: (kylopezjr@yahoo.com to be used for future annual report no	stification)	Şm	6	
For furt	her information	concerning this matter, please of	·	,			
		odolfo Lopez	at (407)	922-0483			
	Name o	of Person	Area Code & Dayt	ime Telephone Number	r		
Enclose	ed 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 enclos	Sedo.00 Fill Certificated) Certified (addition	te of Stat I Copy		sed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ration Section on of Corporations 30x 6327	STREET/COUR Registration Sectorial Division of Corp Clifton Building 2661 Executive (Tallahassee, FL	oorations Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Supreme Pro	o Clean LLC			
(Name of the Limited Liability Compa (A Florida Limited	<u>iny as it now appears</u> Liability Company)	on our records.		
The Articles of Organization for this Limited Liability Company Florida document numberL12000022014			and assig	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lial	oility company here	;:		
S & J Squ	are LLC			
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Compan	y," the designation		breviation
Enter new principal offices address, if applicable:			2917 HA	
(Principal office address MUST BE A STREET ADDRESS)			24 5	n
			<u> </u>	1
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	<u>·e</u> :	ur records, <u>ente</u> er Florida street a		the new
	<i>(</i> 2).	, Florida	7: 0 1	
	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 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>	Address	Type of Action
MGRM	Rodolfo Lopez	719 Palmway St. Kissimmee Fl. 34744	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Femove
			Addi Reprove
D. If amend	ling any other information, enter c	hange(s) here: (Attach additional sheets, if necessar	70-
	May 40	0040	
Dated	May 10 ,	2012 . ember of authorized refresentative of a member	
		Zaida Y Lopez Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00