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13 JAN -4 AHII: 47

JAN - 7 2013

T. HAMPTON

## **COVER LETTER**

TO: Registration S Division of Co		je. Pr	·
SUBJECT. L	PV CLEPHING SER	VICES LLC	
SOBJECT.	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	VEROLIKA W	Name of Person	
		Name of Person	
		Firm/Company	
	GII POHTE UEDA	A LAKES BIVO. And - 35	DS
	TORIG OGUITA ISE	City/State and Zip Code	
	VWCLCAHIA E-mail address: (t	P(4; FLORIDA; 31052 City/State and Zip Code 4CSERVICES @ 42400. Co to be used for future annual report notificat	COM
For further information of	concerning this matter, please c		,
VEROLINA WIL	.SN	at ( <u>904</u> ) <u>864</u> 67 <u>5</u> Area Code & Daytime To	9
Name o	of Person	Area Code & Daytime To	elephone Number
Enclosed is a check for t	he 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)
			,

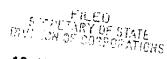
### MAILING ADDRESS:

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



KSV CLEANING	SERVICES //	13 JAN -4 AHII: 48
(Name of the Limited Lial (A Flor	pility Company as it now a ida Limited Liability Comp	appears on our records.)
The Articles of Organization for this Limited Liabil Florida document number	ity Company were filed o	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability compar	ny here:
The new name must be distinguishable and end with the	services L	LC
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability (	Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	<b>:</b>	
(Principal office address MUST BE A STREET A	DDRESS)	
	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
•		
B. If amending the registered agent and/or registered agent and/or the new registered office		s on our records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
		Enter Florida street address
_	City	, Florida Zip Code
	Ciţv	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>	Address	Type of Action
MCRM	LATERIHA STAHFURD	GII POHTE UEDRA LAKES BLED.	Add
		Apt. 2402	Remove
		POHTE VEDRA BEACH; FLORIDA.	320 82
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12/2/12	/kurhi /s	Inila ignature of a	member or auth	orized represer	ntative of a mer	mber

Page 3 of 3

Filing Fee: \$25.00