

L12000051708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

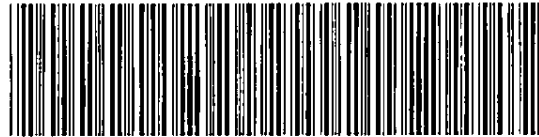
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02/05/24--01029--016 **55.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 5 Star Green Clean Services LLC
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:

Angela Wells
Name of Person

5 Star Green Clean Services LLC
Firm/Company

177 Polo Terrace
Address

Pensacola FL 32534
City/State and Zip Code

Angie.wells1979@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angela Wells at (850) 2911669
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

5 Star Green Clean 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 Liability Company were filed on 04/17/2012 and assigned
Florida document number L12000031708.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

5 Star Green Clean Services LLC (same)
The new name must be distinguishable and contain 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)

177 Polo Terrace
Pensacola FL 32534

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

177 Polo Terrace
Pensacola FL 32534

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:

Angela Wells

New Registered Office Address:

177 Polo Terrace

Enter Florida street address

Pensacola

City

Florida

32534

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 605, 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.

Angela Wells
If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

... manage, enter the title, name, and address of each person being added

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>John M^cCorvey</u>	<u>6368 Mers Lane</u>	<input type="checkbox"/> Add
		<u>Pensacola FL 32526</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>Owner</u>	<u>Angela Wells</u>	<u>177 Polo Terrace</u>	<input checked="" type="checkbox"/> Add
		<u>Pensacola FL 32534</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Angela Wells</u>	<u>177 Polo Terrace</u>	<input checked="" type="checkbox"/> Add
		<u>Pensacola FL 32534</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 02-05, 24

Signature of a member or authorized representative of a member

Angela Wells
Typed or printed name of signee

Filing Fee: \$25.00