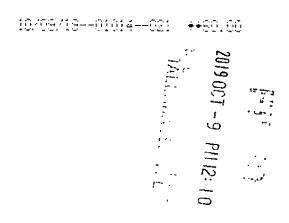


(Re	equestor's Name)	
(Ad	dress)	
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: COMMERCIAL MAINTENANCE 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:
Creorge HMARAL Name of Person Commercial Maintenance LC Firm/Company 413 GREENBRIER A Address WEST PALM BEACH FL 33417 City/State and Zip Code TPEZZID@GMail Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Crearge AMARAL at (561) 246-9725 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$30.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, 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

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida I	Limited Liability Company)
The Articles of Organization for this Limited Liability Co Fiorida document number <u>L1200007315</u>	impany were filed on $\frac{6112012}{7}$ and assigned
This amendment is submitted to amend the following:	2015
A. If amending name, enter the new name of the limite	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the abbreviation "EL.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	413 GREENBRIER A WEST PALM BEACH, FL 33417
B. If amending the registered agent and/or register registered agent and/or the new registered office address	red office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address: 413	Enter Florida street address
WES	TPALM BEACH Florida 33417 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	LIGIA AMARAL	413 areenbrier A	
		WEST PALM BEACH, FL	Remove
		33417	Change
MGR THERESA PEZZO	THERESA PEZZOLLA	4 413 GREENBRIER A	OF Add
		WEST PALM BEACH, FL	<u> </u>
		33417	Change
MGRM LIGIA	LIGIA AMARAL	413 AREENBRIER A	2 Add
		WEST PALM BEACH FI	□ Remove
		33417	□ Change
			□ Add
			Remove
			Change
	PW-00-100-0		□ Add
			□ Remove
			□ Change
			□ Add
			Remove
			_□ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
Note:	tive date, if other than the date of filing: OTTO 18 (optional) (Tective 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	October 7 2019
	Signature of a member or authorized representative of a member.
	GEORGE AMARAL Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00