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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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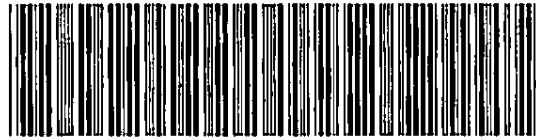
(Business Entity Name)

(Document Number)

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HOV 16 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAINTENANCE AND MOPS, 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:

Franci Jackson

Name of Person

Maintenance and Mops, LLC

Firm/Company

3644 Courtney Drive

Address

Panama City Beach, FL 32408

City/State and Zip Code

maintenanceandmops@aol.com

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

For further information concerning this matter, please call:

Franci Jackson

850

708-2856

at ()

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**

MAINTENANCE AND MOPS, LLC

JUL 13 PM 5:15

(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 JULYN 13, 2012 and assigned Florida document number 2000091073.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Franci Jackson

New Registered Office Address:

3644 Courtney Drive

Enter Florida street address

Panama City Beach

City

Florida 32408

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Franci Pruitt	3644 Courtney Drive	<input type="checkbox"/> Add
		Panama City Beach, FL 32408	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Franci Jackson	3644 Courtney Drive	<input checked="" type="checkbox"/> Add
		Panama City Beach, FL 32408	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	William A Jackson, Jr.	3644 Courtney Drive	<input checked="" type="checkbox"/> Add
		Panama City Beach, FL 32408	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 9/25 20

Graci Jackson
Signature of a member of authorized representatives

Signature of a member or authorized representative of a member

Franci Jackson

Typed or printed name of signee