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(Re	equestor's Name)	· · · · · ·
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COVER LETTER

TÒ:	Registration So Division of Co	ection rporations								
SUBJE		EAL CLEANING & MAINTEN	NANCE SERVICES LLC							
SOBJE	<u></u>	Name of Lim	ited Liability Company							
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.							
Please r	eturn all correspo	ondence concerning this matter	to the following:							
		OSCAR A. PINEDO								
			Name of Person							
			Firm/Company							
		4602 LARAMIE CIR								
			Address							
		NORTH PORT FL, 34286	5							
City/State and Zip Code greensealservices@yahoo.com										
		E-mail address: (to be used for future annual report notific	cation)						
For furt	her information o	concerning this matter, please ca	all:							
OSCAF	A. PINEDO		239 745-8120 at ()	·						
	Name o	of Person	Area Code Daytime	Telephone Number						
Enclose	d is a check for t	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:

TÒ:

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

GREEN SEAL CLEANING & MAINTENANCE 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 $\frac{08/02/2012}{1}$ and assigned Florida document number L12000099364 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: GREEN SEAL LANDSCAPING & MAINTENANCE SERVICES LLC 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) 2797 CARTHAGE ST Enter new mailing address, if applicable: NORTH PORT, FL 34286 (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: New Registered Office Address: Enter Florida street address , Florida

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.

City

If Changing Registered Agent, Signature of New Resistered 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>	Type of Action
MBR	GRACE CUERVO	2797 CARTHAGE ST	= Add
		NORTH PORT, FL 34286	Remove
			Change
MBR	MARLENE PEINADO MUNOZ	1091 OHANA WAY #306	⊟ Add
		NORTH PORT, FL 34289	Remove
			Change
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Filing Fee: \$25.00