L12000112986

	•	
(Red	uestor's Name)	
(Add	lress)	
(Add	iress)	
(City	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
. (Bus	iness Entity Nar	ne)
(Doc	cument Number)	· · · · ·
Certified Copies	Certificates	s of Status
	٠,٠	
Special Instructions to F		
SEP 2 1 2012		
S. TONER		

Office Use Only



300239779423

09/20/12--01013--007 **55.00

FILED

12 SEP 20 MID 51

SEGRETARY OF STATE
ALLAMASSEE, FLORIDA

COVER LETTER

'Division' of Corporations				
SUBJECT: Mighty DIVINE CLEANING 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:				
MARK A. Guidry Name of Person				
Mighty DIVINE LLC				
10716 ILLINOIS St.				
Address				
Youngstown, F. 32466 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
• • • • • • • • • • • • • • • • • • •				
Name of Person Name of Person				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)				

MAILING ADDRESS:

Registration Section

TO:

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

ARTICLES OF ORGANIZATION
OF

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

The Articles of Organization for this Limited Liability Company were filed on
Florida document number

1200/1298/

This amendment is submitted to amend the following:

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

191/194/

The new name must be distinguishable and end with 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:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		
	Enter F	lorida street address
		, Florida
	City	Zin 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:

	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
_		1	Add Remove
<u></u>			Add Remove
ameno	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
_			_
	A Committee Comm		****
	9/19/2012		_

Page 2 of 2

Filing Fee: \$25.00