## L1200115647

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone	e #)	
PICK-UP WAIT	MAIL	
(Business Entity Nar	ne)	
(Document Number)		
Certified Copies Certificates	of Status	
Special Instructions to Filing Officer:		
·		
<u> </u>	<del></del>	

Office Use Only

B. KOHR
SEP 1 8 2012
EXAMINER



300239473093

09/17/12--01030--016 \*\*30.00

12 SEP 17 PH 3: 03

## **COVER LETTER**

TO: Registration Sec Division of Corp	
SUBJECT: <u>F1</u>	RST Service Cleaning, LLC Name of Limited Liability Company
The enclosed Articles of A	mendment and fee(s) are submitted for filing.
Please return all correspon	dence concerning this matter to the following:
	Albania Salas Name of Person
	Firm/Company
	2835 Webb Avenue, 7B
	BYONX NY 10468 City/State and Zip Code
	albaniasalas@ad.com  E-mail address: (to be used for future annual report notification)
For further information co	ncerning this matter, please call:
Albana S	Person at (917), 250-5167  Area Code & Daytime Telephone Number
Enclosed is a check for the	Following amount:    Solution   S

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

1

FIRST SERVICE	Cleanina LLC	
( <u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)	<b>1 1 1 1 1 1 1 1 1 1</b>
The Articles of Organization for this Limited Liability Company we Florida document number <u>L1200115647</u> .	vere filed on 9/10/12	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
Prink Cleaning	Services, LLC	
The new name must be distinguishable and end with the words "Limite" "L.L.C."	d Liability Company," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:	NA	
(Principal office address MUST BE A STREET ADDRESS)	•	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	u/A	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, enter the	name of the new
Name of New Registered Agent:	.1.	
New Registered Office Address:	N   K Enter Florida street address	
<del></del>	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	C.,,	ыр Соис
THE STATE OF THE S		
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and complet	to act in this capacity. I further agree te performance of my duties, and I am	to comply with familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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 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:

. . · K

MGR = Manager MGRM = Managing Member				
<u>Title</u>	Name	Address	Typof Action	
<u> </u>	Ala	<u> </u>	Add Remove	
			_	
	· · · · · · · · · · · · · · · · · · ·		Add Remove	
			Add	
			Remove	
	•		d Remove	
D. If amend	ling any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_	
			<del>-</del>	
_	<u> </u>		<u> </u>	
Dated	9/12/12	·		
	- 1 11	or authorized representative of a member	·····	
	Alpania (Typed	or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00