

L12 000143335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500249733025

07/19/13--01027--002 **25.00

2013 JUL 19 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUL 22 2013
T CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hiialeah Reg Rentals Holdings II, 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:

Alexandro Vitarello, P.A.
Name of Person
Pacifica Companies
Firm/Company
16400 NW 59th Ave
Address
Miami Lakes, FL 33014
City/State and Zip Code
avlaw@vitarello.com
E-mail address: (to be used for future annual report notification)

2013 JUL 19 AM 11:17
SECRETARY OF STATE
TALLHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Katherine Mejia at (305) 206 4139
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

HiClean Pro Rentals Holdings II, 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 11/13/2012 and assigned Florida document number L120000143335

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 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)

FILED
2013 JUL 19 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 Florida street address

_____, Florida _____
City 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 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:

MGR = Manager
MGRM = Managing Member

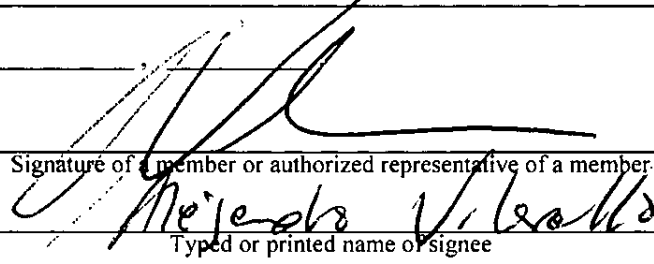
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
title mgr	ARCH III, LLC	16400 NW 59th ave	<input type="checkbox"/> Add
		Miami LAKES, FL 33014	<input checked="" type="checkbox"/> Remove
title mgr	Arch III, LLC	16400 NW 59th ave	<input checked="" type="checkbox"/> Add
		Miami LAKES, FL 33014	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2013 JUN 19 AM 11:17
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____

Signature of member or authorized representative of a member



Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 JUL 19 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED