# L13060003448

(Requestor's Name)	_
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(Document Number)	
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SECRETARY OF STATE

JUL 31 2013

#### **COVER LETTER**

TO:	Registration	
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Division of Corporations

SUBJECT

Cereza Services,LLC

Name of Limited Liability Commune

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

## Carolina Rodriguez Ruiz

Manie of Demon

Firm/Company

## 8325 Bay Pointe Drive Apt#1104

Address

Tampa, FL 33615

City/State and Zip Code

CerezaServices@gmail.com

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

For further information concerning this matter, please call:

## Carolina Rodriguez Ruiz

813, 382-1873

Name of Person

Mar Cale & Davinie Telephane Numbe

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

Carolina Rodriguez Cleaning, LL		
( <u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our in a Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Florida document number L1300003648	Company were filed on 7 January	2013 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
Cereza Services, LLC		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the d	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	<del></del> ,	
(Principal office address MUST BE A STREET ADL	ORESS)	
		Sep 5
Enter new mailing address, if applicable:		PA 2
(Muiling address MAY BE A POST OFFICE BOX)		MA IN
		A C
B. If amending the registered agent and/or registered agent and/or the new registered office ad	istered office address on our recor ldress here:	ds. enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
<del> </del>	Enter Florid	a 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 **Type of Action Address** <u>Title</u> Name Add

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). If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
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oated July 2	22 20/3
	Signature of a member or authorized representative of a member
C	arolina Rodriguez Rui <mark>z</mark>
<del></del>	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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