

L13000042298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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04/17/13--01038--030 **60.00

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13 APR 17 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
APR 18 2013
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Spiffy Clean, 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:

Debora Norani

Name of Person

Spiffy Clean, LLC

Firm/Company

9052 Lake Avon Dr.

Address

Orlando, FL 32829

City/State and Zip Code

dnorani@gmail.com

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

For further information concerning this matter, please call:

Debora Norani

407 590-8522

at ()

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**

FILED

Spiffy Clean, LLC

13 APR 17 PM 1:05

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

CLERK OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/21/2013 and assigned
Florida document number L13000042298.

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)

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

FILED

<u>Title</u>	<u>Name</u>	<u>Address</u>	13 APR 17 PM 1:05	<u>Type of Action</u>
MGRM	Luis Torres	9052 Lake Avenue Dr. TALLAHASSEE, FLORIDA	SECRETARY OF STATE	<input type="checkbox"/> Add
		Orlando, FL 32829		<input checked="" type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Amending email address from deboratron@gmail.com

to dnorani@gmail.com.

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13 APR 17 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated April 11, 2013



Signature of a member or authorized representative of a member

Debora Norani

Typed or printed name of signee

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Filing Fee: \$25.00