# 11300076009

(	Requestor's Name)	
(	Address)	
	Address)	
	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(	Business Entity Name)	
(	Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer:	
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DIVISION OF CONTROLLATIONS

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June 12, 2017

WANDA BARTON 5470 E BUSCH BLVD, #190 TEMPLE TERRACE, FL 33617

SUBJECT: XTREMELY CLEAN JANITORIAL SERVICES LLC

Ref. Number: L13000076009

We have received your document for XTREMELY CLEAN JANITORIAL SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 217A00011800

RECEIVES

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SLUKLARASSEE, FLORIDA

## COVER LETTER

TO: Registration Sect Division of Corp			
SUBJECT: Xtrem	Name of Limit	NHORIO Service Led Liability Company	LC.
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspond	dence concerning this matter to	o the following:	
	Wanda	Name of Person	
	- Xtiensely C	Jean Janitorial Se	ervicello.
	5470 E. Bu	15Ch Blvd. #190	
	Temple Terro	CC FI. 33017 City/State and Zip Code	
	10 foo x tremely (E-mail address: 16	Clean partorialsery  o be used to future annual report notifica	ICC, COM
For further information con	ncerning this matter, please ca	II:	
Wanda Name of	Barton Person	at $(263)$ $(00-9)$ Area Code Daytime T	ì Q Q Celephone 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

X+remely Clean Janite Compa (Name of the Limited Liability Compa (A Florida Limited I	DYICI Service LLE 7  ny as it now appears on our records.)  Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1300076009</u> .	orical Service LLC any as it now appears on our records.)  itability Company)  were filed on 5 24 2013 and assigned assi
This amendment is submitted to amend the following:	See
A. If amending name, enter the new name of the limited liab	
The new name must be distinguishable and contain the words "Limited Liabil  Enter new principal offices address, if applicable:	T320 E. Fletcher Ave. #166
(Principal office address MUST BE A STREET ADDRESS)	Jampa F1 33637
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	7320 E. Fletcher Ave. #166 Tampa, Fl. 331637
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, <u>enter the name of the new</u> e:
Name of New Registered Agent: Jakes	hia Barton
New Registered Office Address: 5470 E	Enter Florida street address
Temple	Terrace Florida 331637 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 605, 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.

f Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action** Title Name <u>Address</u> Barton, Wanda L. 5470 E. Busch Blvd. # 190 0 Add MBR Temple Terroce, Fl. 33617 ☐ Change □ Add ☐ Remove OLVISION OF CONSTORED TO 101 ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change \_□ Add ☐ Remove

\_□ Change

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an effective da	e, if other than ite is listed, the date late inserted in thi feetive date on th	must be specific a s block does not	nd cannot be prior meet the applic	to date of filing or a ble statutory fili	more than 90 days at ng requirements, t	<b>tional)</b> der filing.) Pursuant to 605,0207 (3 his date will not be listed as th
			date but no	t an effective	time, at 12:01	a.m. on the earlier of:
ocument's el	pecifies a dela day after the					
e record s The 90th	th Clay o	record is filed	. <u>2017</u>	·	ve of a member	

Page 3 of 3

Filing Fee: \$25.00