## #/13000/04244

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13 AUG - I PH 3º 27 SECRETARY OF STATE FALLAHASSEE, FLORIDA.

K. SALY
EXAMINER

AUG - 2 2013

## **COVER LETTER**

TO:	Registration Section
	Division of Corporations

SUBJECT: Pasco Gutters & windows cleaning Service 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:

Jonathan Gonzalez
Name of Person
Pasco autters & windows cleaning service
7524 I Lex DR
Address
PR 41 34668
City/State and Zip Code
egbklyn1@aol.com
F-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sonathan Gonzalez at (727) 808-9296

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

CLES OF ORGANIZATION OF	13 AUD TILED
OF	13 AUG - 1 PM 3-22
rters of windows	CINEMAN PRIME LC
Liability Company as it now appears on our reco	rds.) Fl-Obin.
Florida Limited Liability Company)	— ¬¬¬¬ηυд:

Zip Code

The Articles of Organization for this Limited Liability Company were filed on 50/4/17,2013 and assigned Florida document number 13000/04.244

This amendment is submitted to amend the following:

This afficient is submitted to afficile the following.	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words 'Limit'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 of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> <u>or Managing Member being added or removed from our records</u>:

MGR = 1	Manager	
MGRM	<ul><li>Managing</li></ul>	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
			Remove
			Add
			Remove
		<u></u>	
			Add
			Remove
			<u>.</u>
			Add
			Remove
			Add
			Remove

. If am en	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated	10/4 30, 2013
	enel Dogel
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00