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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

'rom.

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323) 962-3889

inter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

annual report mailings. Enter only one email address please.

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALLIE CLEANING SERVICES LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
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Corporate Filing Menu

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#6679 F.002/009

### **COVER LETTER**

	TO: Registration Section Division of Corporations			
,	SUBJECT: ALLIE CLEANING SERVICES I			
	(Name of Lim	ited Liability Company)		
The enclosed Articles of Amendment and fee(s) are submitted for filling.				
	Please return all correspondence concerning this matter	to the following:		
	imelda Vasquez			
		(Name of Person)	·	
	Legalzoom.com, Inc.			
		(Firm/Company)	···	
	100 W, Broadway Su			
		(Address)		
	Glendale, CA 91210			
		(City/State and Zip Code)		
	For further information concerning this matter, please or	all:		
	Imelda Vasquez	at ( 323 ) 962-8600 ex	t 7950	
	(Name of Person)	(Area Code & Daytime ?	Celephone Number)	
	Enclosed is a check for the following amount:			
	\$25.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing address:	STREET/COURIER	ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301 .09/26/2013 13.17 8137831325

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A D*	CICLES OF AMENDME	ENT	
FILES.	TO	4114	
ART	CLES OF ORGANIZA	TION	<b>A</b> ≤ S <b>3</b>
· ****	OF	+=	59 _
ALLIE CLEANING SERVIO	PERLIC		SS
Name of the Limite	Liability Company as it now app. Florida Limited Liability Company	cars on our records.)	
	Florida Limited Liability Company	y)	PS ≥ □
The Articles of Organization for this Limited I	ishility Company were filed on	09/09/2013	and essigned
L13000126821	, , , , , , , , , , , , , , , , , , ,		DA 4
The new name must be distinguishable and end w. "L.L.C."	th the words "Limited Liability Con	npany," the designation	"LLC" or the abbreviation
B. If amending the registered agent and revistered agent and/or the new revistered of	or registered office address of office address bere:	n our records, enter	the name of the new
Name of New Registered Agent:	Melissa Tomlin		<del></del>
New Registered Office Address:	39342 FIFTH AVENUE		
(Enter Florida stree			address)
	ZEPHYRHILLS	, Florida	33542
	(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

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MCR = Manager

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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:

MGRM = Managing Member Type of Action Title Address Name MGR Melissa Tomlin 39342 FIFTH AVENUE □ Add **▼** Remove 39342 FIFTH AVENUE MGR Anthony Tomlin hhA ZEPHYR HILL, FL 33542 Remove MGR 39342 FIFTH AVENUE ✓ Add Melissa Tomlin ZEPHYRHILLS, FL 33542 □ Remove MGR ✓ Add 39342 FIFTH AVENUE Anthony Tomlin □ Remove ☐ Remove **M**Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Ш Article II: The principal office and mailing address is: LORIDA 39342 FIFTH AVENUE ZEPHYRHILLS, FL 33542 September 1645 Signature of a member or authorized representative of a member

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Melissa Tomlin
Typed or printed name of signee

Filing Fee: \$25.00