

# L13000129649

ROBERT BRINKER

(Requestor's Name)

8225 Bridge Water Trl

(Address)

Tall, FL 32312

(Address)

850 688 8257

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

Steam Pro of Tallahassee

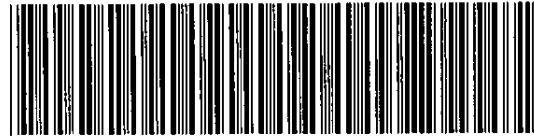
(Business Entity Name)

(Document Number)

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TO AGENCY PLEASE  
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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
2014 AUG -4 PM 3: 20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Steam Pro of Tallahassee LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 9-13-13 and assigned Florida document number L130001296-19.

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 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.*

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Barbara Levins	8225 Bridge Water Trl	<input checked="" type="checkbox"/> Add
		Tall, FL 32312	<input type="checkbox"/> Remove
AMBR	Shanna Brinker	8225 bridge Water Trl	<input type="checkbox"/> Add
		Tall, FL 32312	<input type="checkbox"/> Remove <input checked="" type="checkbox"/> change
AMBR	Robert Brinker	8225 Bridge Water Trl	<input type="checkbox"/> Add
		Tall, FL 32312	<input type="checkbox"/> Remove <input checked="" type="checkbox"/> change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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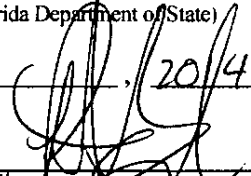
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated Aug 4, 2014



Signature of a member or authorized representative of a member

Robert Brinker

Typed or printed name of signer

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FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA