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COVER LETTER

TO: Registration Second Division of Cor	
SUBJECT:	A1 CLEANIT LLC
	Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ondence concerning this matter to the following:
•	MARIA LOPEZ Name of Person
	Name of Person
	A1 CLANIT LLC
	Firm/Company
	4630 SE 5TH AUR ADT 104
	Cape Coral FL 33904 City/State and Zip Code Jeallufa 9 @ Gmail. com E-mail address: (to be used for future annual report notification)
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further information c	oncerning this matter, please call:
MARIA L	10 De 7 705-08 SZ
Name o	at (239) 205-08 53 f Person Area Code Daytime Telephone Number
Enclosed is a check for the	ne following amount:
□ \$25.00 Filing Fee	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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



March 7, 2016

MARIA LOPEZ 4630 SE 5TH AVE APT 104 CAPE CORAL, FL 33904

SUBJECT: A1 CLEANIT LLC Ref. Number: L13000158610

We have received your document for A1 CLEANIT LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU CAN NOT HAVE TWO REGISTERED AGENTS

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 316A00004642

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	LEANIT LL		
(Name of the Limite	d Liability Company as it nov A Florida Limited Liability Co	w appears on our records.) mpany)	······
		۔ جا جا ابر	and assigned
The Articles of Organization for this Limited Lia	• •	d on 11/12/20	13 and assigned
Florida document number L 13 000 15	-8610		
This amendment is submitted to amend the following	wing:	·	
A. If amending name, enter the new name of	the limited liability comp	pany here:	
-			
The new name must be distinguishable and contain the wo	rds "Limited Liability Compan	y," the designation "LLC" or the	230
Enter new principal offices address, if applica	ble:	·	R 2 8
(Principal office address MUST BE A STREET	ADDRESS)	<u></u>	man and and and and and and and and and a
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•			हाः । भूः 0
Enter new mailing address, if applicable:			₹ 65
Mailing address MAY BE A POST OFFICE B	<u>OX)</u>		
·			
B. If amending the registered agent and/o registered agent and/or the new registered offi		ress on our records, <u>en</u>	ter the name of the new
		LOPEZ	
Name of New Registered Agent:	MARIA	P (1534)	· .
	4630 SE 51	h AVE APT #	104
New Registered Office Address:		nter Florida street address	· · · · · · · · · · · · · · · · · · ·
·	CADE CON	Florida	32904
	City	, Fibrida	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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00