

L14 000005269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

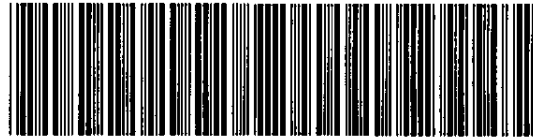
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 10 2014

T CLINE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NAME CHANGE OF HYDRO MAX PRESSURE WASHING LLC TO GULF COAST COMMERCIAL CLEANING SERVICES 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:

KEELAN K. COLE

Name of Person

GULF COAST COMMERCIAL CLEANING SERVICE LLC

Firm/Company

1206 EAST HATTON STREET

Address

PENSACOLA, FL 32503

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEELAN K. COLE

Name of Person

at **850 542-6511**

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

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HYDRO MAX PRESSURE WASHING LLC

Page 1 of 3

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	BUTLER, JEFFERY M	2039 ROBERTS CIRCLE	<input type="checkbox"/> Add
		PENSACOLA, FL 32503	<input checked="" type="checkbox"/> Remove
AMBR	BUTLER, JEFFERY M	2039 ROBERTS CIRCLE	<input checked="" type="checkbox"/> Add
		PENSACOLA, FL 32503	<input type="checkbox"/> Remove
AMBR	COLE, KEELAN K	1206 HATTON STREET	<input checked="" type="checkbox"/> Add
		PENSACOLA, FL 32503	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

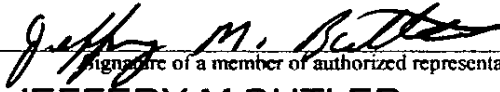
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ADDING FEI/EIN NUMBER (36-4754364)

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 22 MAY, 2014



Signature of a member or authorized representative of a member

JEFFERY M BUTLER

Typed or printed name of signer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA