## 14000 120 861

(Re	equestor's Name)	
(Ac	idress)	· · · · · · · · · · · · · · · · · · ·
(Ac	ddress)	<del></del>
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Dx	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

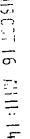


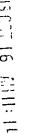
200334337962



PARTE

((,, ))





## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: ECO	Pressure Clea	ning Services LLC ted Liability Company	
	Name of Limi	ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are subr	mitted for filing.	
Please return all correspon	dence concerning this matter (	to the following:	
	Karzo	Name of Person	
		Name of Person	
	Eco Fressure	Cleaning Services	LLC.
	-	Firm/Company	
	4858 S.E. May	ior Way	
		Address	
	STMART FO	City/State and Zip Code	
	ECO Service 195	C. Q. MAIL. LE M. to be used for future annual report notific.	
	E-mail address: (I	to be used for future annual report notific	ation)
For further information co	ncerning this matter, please ca	ill:	
Stephen A	Keane	at (773 ) 347 - 6 Area Code Daytime T	2086
Name of	Person	Area Code Daytime T	'elephone Number
Enclosed is a check for the	e 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



October 5, 2019

KAREN K KEANE 4858 SE MAJOR WAY STUART, FL 34997

SUBJECT: ECO PRESSURE CLEANING SERVICES, L.L.C.

Ref. Number: L14000120861

We have received your document for ECO PRESSURE CLEANING SERVICES, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The last page is missing from the document. Please see the enclsosed information.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6050.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 419A00020508

www.sunbiz.org

7019 OCT 16 KILLI: 45

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 7-16-14 and assigned Florida document number 414 000 12 0861 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 contain 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

## 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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR ST	Stephen A. Keane	4858 S.E. Major Way STUART,	3444/ 151. <b>D</b> /Add
			Remove
			Change
			Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			☐ Change
		<del></del>	🗆 Add
			Remove
			Change
<del></del>			
			Remove
			Change

_	
_	
_	
_	
_	
_	
_	
_	
_	
_	
	ve date, if other than the date of filing: September 17. 2019 (optional)
an effe	ctive date is listed, the date must be specific and cannot bé prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)
ote:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
ocum	ent's effective date on the Department of State's records.
	to the delicited official data, but not an effective time, at 17:01 a.m. on the earlier of
e rec The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
	, and the second
	· · · · · · · · · · · · · · · · · · ·
Dated	
ated _	Signature of a member or authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00