

L14000154884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

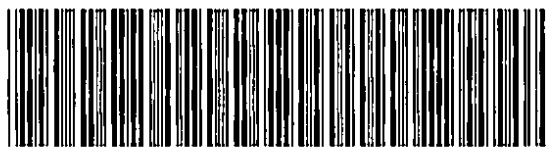
(Business Entity Name)

(Document Number)

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R. WHITE
MAR 12 2019

FILED
2019 FEB 25 AM 10:01
STATE OF FLORIDA
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NORMAN JEVNE PRO CLEANING 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:

SAMANTHA JOSEPH, ESQ
Name of Person

THE LAW OFFICE OF SAMANTHA C. JOSEPH, PLLC
Firm/Company

P.O. Box 240114
Address

JACKSONVILLE, FL 32220
City/State and Zip Code

samantha@letsamhelp.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SAMANTHA JOSEPH at (954) 594-2404
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION **FILED**
OF

2019 FEB 25 AM 10:01

NORMAN VIEUNE PRO CLEANING 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 SEPTEMBER 15, 2014 and assigned Florida document number L14000154884.

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)

9838 Old Baymeadows Rd #357
JACKSONVILLE, FL 32250

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9838 Old Baymeadows Rd
357
JACKSONVILLE, FL 32250

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:

SAMANTHA JOSEPH, ESQ

New Registered Office Address:

8705 Perimeter Park Blvd #1

Enter Florida street address

JACKSONVILLE

City

Florida

32214

Zip Code

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

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MATTEN HERRING	2385 NE HWY 350	<input type="checkbox"/> Add
		CROSS CITY, FL 32628	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Juan Antonio Sirear	9838 Old BayMEADOWS Rd	<input checked="" type="checkbox"/> Add
		#357 JACKSONVILLE, FL 32250	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Rodrigo Chaffy	9838 Old BayMEADOWS Rd	<input checked="" type="checkbox"/> Add
		#357	
		JACKSONVILLE, FL 32250	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Eder Bonilla	9838 Old BayMEADOWS Rd	<input checked="" type="checkbox"/> Add
		#357	
		JACKSONVILLE, FL 32250	<input type="checkbox"/> Remove
		9838 Old BayMEADOWS Rd	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

DDA -

BREEZE GROUP SERVICES LLC

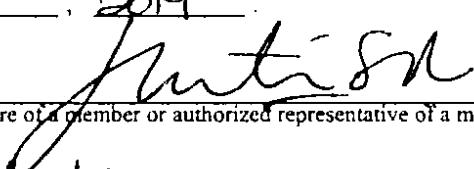
Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

he record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
The 90th day after the record is filed.

Dated FEBRUARY 22, 2019.



Signature of a member or authorized representative of a member

JUAN ANTONIO SUGAR RUIZ

Typed or printed name of signer