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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations			
Just Clean Orlando LLC			
Name	of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this			
Michael Menage			
Name of Person	 		
Just Clean Orlando LLC			
Firm/Company			
314 Bloomingdale Drive			
Address			
Davenport			
City/State and Zip Code			
justcleanorlando@gmail.com			
E-mail address: (to be used for future annual	report notification)		
For further information concerning this matter, ple	ease call;		
michael menage	8632077043		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following am	ount:		
☑ \$25 Filing Fee	S55 Filing Fee & Certified Copy		
INHS18 (2/14)			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: Just Clean C	Orlando LLC		
2. (a)	314 Bloomingdale Drive	(b) 314 Bloomingdale Drive		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Davenport	Davenp	port	
	FL 33897	FL 338	97	
	12/19/2014	L140001	93556	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Gluckmann, Kenn			
	Registered Agent and Registered Office shown on the records of 1065 W Morse Blvd	f the Florida Dept. of Sta	te:	
	Registered Office Address (MUST BE FLORIDA STREET Suite 102	ADDRESS)	17 SEC TALL	
	Winter Park, FI	32789	FILED AUG 31 PH 3 29 CRETARY OF STATE LAHASSEE, FLORIDA	
(b)	Michael Menage	- '- '- '- '- '- '- '- '- '- '- '- '- '-	31 -	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	l Office address:	FLOOF ST	
	314 Bloomingdale Drive	· · · · · · ·	3 25 CATE ORIDA	
	NEW Registered Office Address:	<u> </u>	_	
	Davenport		_	
	, FL	33897		
agent w was/wei the artic	mited liability company is not organized under the law age or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited liar authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registered office ability company, it is of the limited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany.	
I hereb	vaccent the appointment as registered assets and	ee to act in this can		
he oblig o merel	ins of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have the proper and the change.	performance of my of for in Chapter 605 hereby confirm that	active I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been	
Signature	of Registered Agent			
	· -			