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COVER LETTER

	ation Section n of Corporations							
SUBJECT:	BANDA & F	ROOSTER	LLC					
SUBJECT: _		Name of Limite	ed Liability Company					
The enclosed A	ticles of Amendment and t	fee(s) are subm	itted for filing.					
Please return a	correspondence concernin	g this matter to	the following:					
		F	ROCIO BANDA					
			Name of Person					
			Firm/Company					
	640 REEV	ES DRIVE						
			Address					
	FORT WA	LTON BEA	CH, FL 32547					
			City/State and Zip C	ode		Flan	(C)	
	ROCIOBAI	_	MAIL.COM be used for future am	nual report notific	ation)	Total Section	# 5 A	
For further info	rmation concerning this ma					HASS	APR 13	The state of
ROCIO BA	NDA		850	543-6106			AH 10:	
	Name of Person		Area Code	Daytime	Celephone Number	F STATE	10: 52	Section,
Enclosed is a c	neck for the following amou	unt:						
■ \$25.00 Fill		ng Fee & e of Status	□ \$55.00 Filing F Certified Cop (additional copy	у	Sectificate Certified Co (additional co	of Status &		

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 **OF**

BANDA CLEANING SERVICES 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 Cor	mpany were filed on JANUARY 13, 2015 and assigned
Florida document number L15000007379	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
BANDA & ROOSTER LLC	
The new name must be distinguishable and end with the words "Limit	ted 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 ADDRE	<u> </u>
	₹ 1 1
Enter new mailing address, if applicable:	Sold — grants
(Mailing address MAY BE A POST OFFICE BOX)	
	TO THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NAMED IN COLUM
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B. If amending the registered agent and/or registe registered agent and/or the new registered office addre	red office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered A	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 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			☐ Remove
			□ Add
			☐ Remove
			AART AART AART AART AART AART AART AART
			Remove Re
			□ Remove
			□ Remove

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