# L15000014040

(Rea	uestor's Name)	
(4	,	
(Add	ress)	
·	•	
(Add	ress)	
(City	/State/Zip/Phon	e #)
<b></b>		_
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	
		•

Office Use Only



400291818454

11/01/16--01002--015 \*\*30.00

SECRETARY OF STATE

RECEIVED

FILED

S Warren NOV 0 1 2016

## **COVER LETTER**

TO:	Registration Se Division of Cor		•	1
		J&D Excellenc	e Cleaning Services LLC	
SUBJI	ECT:	Name of Lim	ited Liability Company	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			Juan B Herrera Sr	
			Name of Person	
		J&D I	Excellence Cleaning Services LLC	
			Firm/Company	
		950	01 Fontainebleau Blvd Apt 414	
			Address	
			Miami FL 33172	
		<del>, , , , , , , , , , , , , , , , , , , </del>	City/State and Zip Code	
			udmila.herrera2@gmail.com	
		E-mail address: (	to be used for future annual report notif	ication)
For fur	ther information of	concerning this matter, please c	all:	
	Liudmi	la Herrera	781 95 at ()_	531176
<del></del>	Name o	of Person		Telephone Number
Enclos	ed is a check for t	he following amount:		
<b>\$</b> 2	5.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	lience Cleaning Services LLC		
(Name of the Limited Liabili (A Florida	ity Company as it now appears a Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability C	Company were filed on	01/23/2015	and assigned
lorida document numberL15000014040	·		
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the lim	ited liability company her	2:	
e new name must be distinguishable and contain the words "Lim	nited Liability Company," the des	ignation "LLC" or the abb	revia <b>jio</b> n "L.L.C."
nter new principal offices address, if applicable:			
rincipal office address MUST BE A STREET ADDI	RESS)	%;x ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	<u> </u>
	-	FLORID	
nter new mailing address, if applicable:		Δ <del>V</del>	" ພັ
failing address MAY BE A POST OFFICE BOX)		·	
. If amending the registered agent and/or regisegistered agent and/or the new registered office add		our records, <u>enter t</u>	he name of the
Name of New Registered Agent:	Liudm	ila Herrera	
New Registered Office Address:	·	eau Blvd Apt 414	
•	Enter Florid	a street address	
	Miami	, Florida	33172
	City		Zip Code

### 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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
President	Juan B Herrera	9501 Fontainebleau Blvd Apt 414 N	<b>@</b> Add
			□ Remove
			Change
			D Add
		*,***	□ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			Add
			Remove
			☐ Change
			Add
		· · ·	□ Remove
			Change
		े	<u>~ □</u> <b>/</b> 666
		FLORIDA	Remove
		D A	커 # ☐ Change

,	•	<del> </del>				
			<del>,</del>			
	<del></del>	···········				<del></del>
				····································		<del></del>
·						<del></del>
<u></u>			- <del></del>			<u> </u>
_					<del></del>	<del></del>
			October 25th, 2016	(an	otional\	
ffortivo d	ste if other than the date o	of filing:		T 1 DE 1	wulai,	suant to 605.02
Effective d	ate, if other than the date of date is listed, the date must be spendered in this block do	of filing: cific and cannot be p	rior to date of filing or m	ore than 90 days at	ter filing.) Purs	nat ha liata i
Note: If the	ate, if other than the date of date is listed, the date must be spe date inserted in this block doe effective date on the Department	of filing: cific and cannot be p es not meet the ap	rior to date of filing or m	ore than 90 days at g requirements, t	ter filing.) Purs his date will i	not be listed
Note: If the locument's	date inserted in this block doe effective date on the Departme	of filing: cific and cannot be p es not meet the app ent of State's reco	rior to date of filing or m plicable statutory filing rds.	g requirements, t	his date will 1	
Note: If the locument's e record	date inserted in this block doe effective date on the Departme	of filing: cific and cannot be p es not meet the app ent of State's reco	rior to date of filing or m plicable statutory filing rds.	g requirements, t	his date will 1	
Note: If the locument's e record	date inserted in this block doe effective date on the Department specifies a delayed effect a day after the record is	of filing:	rior to date of filing or molicable statutory filing rds.	g requirements, t	his date will 1	
Note: If the locument's e record	date inserted in this block doe effective date on the Departme	of filing: cific and cannot be p es not meet the app ent of State's reco	rior to date of filing or molicable statutory filing rds.	g requirements, t	his date will i	
Note: If the locument's e record The 90th	date inserted in this block doe effective date on the Department specifies a delayed effect a day after the record is	of filing:	rior to date of filing or molicable statutory filing rds.	g requirements, t	his date will i	
Note: If the locument's e record	date inserted in this block doe effective date on the Department specifies a delayed effect day after the record is  October 25th	cific and cannot be pes not meet the appent of State's reconstitute date, but filed.	rior to date of filing or molicable statutory filing rds.	g requirements, t	his date will i	
Note: If the locument's e record	date inserted in this block doe effective date on the Department specifies a delayed effect day after the record is  October 25th	cific and cannot be pes not meet the appent of State's reconctive date, but filed.	rior to date of filing or molicable statutory filing rds.  not an effective t	g requirements, t	his date will i	

Filing Fee: \$25.00