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TO:	Registration Se Division of Cor					
415 150 75		AGE CUSTODIAL MANAC	BEMENT, LLC			
SUBJE	CI:	Name of Lin	nited Liability Con	mpany		
				1		
The end	losed Articles of	Amendment and fee(s) are sub	omitted for filing	;. 		
Please	eturn all correspo	ndence concerning this matter	to the following	ş;		
		Maitee Lazo & Guillermo	Ricard			
			Name of I	Person	 	
		CLEAN IMAGE CUSTO	DIAL MANAG	EMENT, LLC		
			Firm/Con	npany		
		10382 SW 5 ST				
			Addre	ss	····	
		Miami, Florida 33174				
		g.ricard90@gmail.com	City/State and	Zip Code		
		E-mail address: (to be used for futi	ure annual report not	tification)	
For furt	her information co	oncerning this matter, please c	all:			
Guiller	mo Ricard		786 at (431-7272		
	Name of	f Person	Area	Code Daytin	ne Telephone Number	
Enclose	d is a check for th	e following amount:				
■ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Fi Certified (additional	~	☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)	
	Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314		STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Control Tallahassee, FL 3.	on orations enter Circle	

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

OF

2017 JUL 31 AM11: 16 CLEAN IMAGE CUSTODIAL MANAGEMENT, LLC (Name of the Limited Liability Company as it now appears on our record (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number ____ L15000015690 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 "LLC." 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: Guillermo Ricard Name of New Registered Agent: 7114 SW 111 CT New Registered Office Address: Enter Florida street address Miami City

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

ích – M			
ÍGR= M MBR= A	anager uthorized Member		
<u>itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
 IGR	Guillermo Ricard	7114 SW 111 CT Miami, FL 33173	
		7114 5W FIT CT Whalm, PL 55173	
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mecuv an effec	e date, if other than the date of filing:tive date is listed, the date must be specific and cannot be prior to da	(optional) te of filing or more than 90 days after filing.) Pursuant to 605.02
<u>lote:</u> If	The date inserted in this block does not meet the applicable at's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed
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e reco The 9	rd specifies a delayed effective date, but not an Oth day after the record is filed.	effective time, at 12:01 a.m. on the earlier
	1	
ated _	July 25. 2017.	1 (()) -
		1 (4650)
	Signature of a member or authorized	representative of a member
	Maitee Lazo	
	Typed or printed nar	

Page 3 of 3

Filing Fee: \$25,00