

L15000020470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

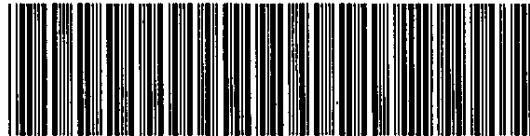
(Business Entity Name)

(Document Number)

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16 DEC -5 AM 10:44

DEC 06 2016
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Clean It Kissimmee 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:

Nigel Cwietkow

Name of Person

Clean It Kissimmee LLC

Firm/Company

4608 Cumbrian Lakes

Address

Kissimmee, FL 34746

City/State and Zip Code

mandycwt@icloud.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nigel Cwietkow

407 201-5232

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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

RECEIVED
2016 DEC -5 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

→ already paid 22 Nov 2016

114



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 23, 2016

NIGEL CWIETKOW
P.O. BOX 136141
CLERMONT, FL 34713

SUBJECT: CLEAN IT KISSIMMEE LLC
Ref. Number: L15000020470

We have received your document for CLEAN IT KISSIMMEE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Correct date of filing and document number are missing in document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 916A00025153

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REGISTRY OF STATE
CORPORATIONS
16 DEC -5 AM 10:44

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

Clean It Kissimmee 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 01-27-2015 and assigned
Florida document number L15000020470.

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)

4608 Cumbrian Lakes

Kissimmee, FL 34746

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 431

Intercession City, FL 33848

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:

Name of New Registered Agent:

Nigel Cwietkow

New Registered Office Address:

4608 Cumbrian Lakes

Enter Florida street address

Kissimmee

City

Florida 34746

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.

X 

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>
AMBR	Amanda Cwietkow	4608 Cumbrian Lakes	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34746	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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AMBR: 44

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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.

Dated 1st December 2016

X _____
Signature of member

Signature of a member or authorized representative of a member

Nigel Cwietkow

Typed or printed name of signee

Filing Fee: \$25.00

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