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SECRETARY OF STATE

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STATE OF CORPORATION

JUL 07 2015

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COVER LETTER

TO: Registration Section of Corp					
QUALITY'S SUBJECT:	CLEANING SERVICES	S INC			
Sobolect.	Name of Lim	ited Liability Company			
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please return all correspond	dence concerning this matter	to the following:			
	JENNY	A COSMA			
		Name of Person			
		N/A			
		Firm/Company			
	4200	TARA COURT			
		Address			
	ORLANDO , FL 32809				
		City/State and Zip Code			
	JELENALEX@GMAIL.COM E-mail address: (to be used for future annual report notification)				
For further information cor	ncerning this matter, please ca				
JENNY	A COSMA	407 879-6757 at ()			
Name of	Person	Area Code Daytime T	elephone Number		
Enclosed is a check for the	e 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)		
			SEC TALL		
	NG ADDRESS: tion Section	STREET/COURIER Registration Section	SECHETAL ANDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 SECRETARY_OF STATE

SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

QUALITY'S CLEA	ANING SERVICES LLC			
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears mited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Con Florida document number L15000058149	npany were filed on $\frac{04/0}{1}$	2/2015 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limite</u>	d liability company her	e:		
N/A	•	_		
The new name must be distinguishable and contain the words "Limited	Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	4200 TARA COURT			
(Principal office address MUST BE A STREET ADDRES	SS) ORLAI	NDO , FL 32809		
Enter new mailing address, if applicable:	4200	TARA COURT		
(Mailing address MAY BE A POST OFFICE BOX)	ORLA	NDO , FL 32809		
	JENNY A COSM	IA		
Name of New Registered Agent:				
New Registered Office Address:	4200 TARA COU			
		du street address		
	ORLANDO City	, Florida 32809 Zip Code		
New Registered Agent's Signature, if changing Registered A	ř	гір Соце		
provisions of all statutes relative to the proper and com accept the obligations of my position as registered ager being filed to merely reflect a change in the registered company has been notified in writing of this change.	nt as provided for in Cl office address, I hereby	hapter 605, F.S. Or, if this document is		
		O: 56		
I	Page 1 of 3	<i>→</i>		

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
N/A	N/A	N/A	
			☐ Remove
			☐ Change
			Add
			☐ Remove
			Change
			Add
			□ Remove
			Change
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			SECRETARY OF STATE STATE OF CORPORATIONS OF SECRETARY OF
			AHIQ: 56 E. FLOADDA

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If the red (b) The	cord specifies a delayon 90th day after the re	ed effective d ecord is filed.	late, but not a	n effective tim	ne, at 12:01 a.m	. on the	earlie	r of:
Dated	JULY,01		2015					N 15 V not word
	+ Jenny	A, 609	sma	ed representative of		SEC	15 _	SECI
	· . 	Signature of a r	nember or authoriz	ed representative of	a member	RETAS	9 JN	NOF NOF
		JENNY A	A COSMA Typed or printed n			_ <u>₩</u> ~	→	CORPORTED THE CORPORATION OF THE
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			Page 3	of 3		>`	9.	O.K.

Filing Fee: \$25.00