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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
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J. HARRIS

COVER LETTER

TO: Registration Se Division of Cor			
SWS Clean SUBJECT:	ing Service, LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	Wendell Persi Soares		
		Name of Person	
		Firm/Company	
	3360 Banks Road, Apt 20-	1	
		Address	
	Margate, Florida 33063		
		City/State and Zip Code	
	swsservicesolutions@gmail		
For further information of	oncerning this matter, please c	to be used for future annual report notifi all:	cation)
Wendell Soares		954 681-6469 at ()	
Name of	l' Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 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

SWS Cleaning Services, LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our reconstituted Liability Company)	rds.)
The Articles of Organization for this Limited Liability Cor Florida document number <u>L15000063940</u>	mpany were filed on 04/13/2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
SWS Service Solutions, LLC		
he new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	2001	··_
THICIPAL OFFICE MADIESS MOST BE A STREET ADDRE		201 AL
Enter new mailing address, if applicable:		S 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Mailing address MAY BE A POST OFFICE BOX)		inc.
		71 - 3 R
		
N 10 P 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		. ∂
		ds, <u>enter the name of the r</u>
egistered agent and/or the new registered office address	ss nere:	
Name of New Registered Agent:		 -
New Registered Office Address:		
	applicable: OST OFFICE BOX) Ted agent and/or registered office address on our records, enter the name of the nam	
	10	`lorida
	P	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member <u>Title</u> Name **Address Type of Action** _□ Add ☐ Remove _□ Change □ Add ☐ Remove □ Change □ Add ☐ Remove _□ Change _□ Add ☐ Remove □ Add _□ Remove _□ Change

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ective date, if other than t	the date of fili	ng:		(opt	tional)	
etfective date is listed, the date e: If the date inserted in this	must be specific at	nd cannot be prior	to date of filing or n	ore than 90 days aft	ter filing.) Pursuar	nt to 605.02 the listed
ument's effective date on the				g requirements, ti	ns date will not	oc nsicu
record specifies a delay he 90th day after the r	yed effective ecord is filed	date, but no 1.	t an effective t	ime, at 12:01	a.m. on the	earlier
March 16		2018	\supset		Age	2818
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	/	[•		表對	HAR 4
	Signature of a	a member or autho	orized representative	of a member	SSEC F	ശ

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Filing Fee: \$25.00